2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021991

FILED Jan 09, 2007 Secretary of State

Entity Name: NORTH RIVER RESTORATION, INC.		
Current Principal Place of Business:	New Principal Place of Business:	
6900 PHILIPS HWY		
#21 JACKSONVILLE, FL 32216		
Current Mailing Address:	New Mailing Address:	
6900 PHILIPS HWY #21		
JACKSONVILLE, FL 32216		
FEI Number: 59-3562283 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
RADIN, DONALD A 6900 PHILIPS HWY, STE 21 JACKSONVILLE, FL 32216 US		
The above named entity submits this statement for the pur in the State of Florida.	rpose of changing its registered office or registered agent, or both	n,
SIGNATURE:		
Electronic Signature of Registered Agent	t Date	_
Election Campaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO)RS
Title: DP () Delete	Title: DP (X) Change () Addition	

Name: RADIN, DONALD A Name: RADIN, DONALD A 12729 S MUIRFIELD BLVD Address: 2 VIA BELLANO Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: PALM COAST, FL 32137

Title: DST () Delete Title: () Change () Addition

MANTIONE, JOSEPH S Name: Name: Address: 1388 BARRINGTON CIR Address: ST AUGUSTINE, FL 32092 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD A. RADIN DP 01/09/2007