

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737150

Entity Name: RIVERSIDE THEATRE, INC.**Current Principal Place of Business:**3250 RIVERSIDE PARK DRIVE
VERO BEACH, FL 32963**Current Mailing Address:**3250 RIVERSIDE PARK DRIVE
VERO BEACH, FL 32963 US**FEI Number:** 59-1764305**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORNELL, ALLEN D
3250 RIVERSIDE PARK DRIVE
VERO BEACH, FL 32963 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title TREASURER
Name MCGOWAN, RAYMOND
Address 400 BEACHVIEW DR
 3 SOUTH
City-State-Zip: VERO BEACH FL 32963

Title VP
Name BALDWIN, DAVID M
Address 190 LOGGERHEAD POINT
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR
Name WONHAM, FRED
Address 501 RIVER DRIVE
City-State-Zip: VERO BEACH FL 32963

Title PRESIDENT
Name WAXLAX, HEIDEMARIE S
Address 950 REEF RD
City-State-Zip: VERO BEACH FL 32963

Title VP
Name BAIN, GAIL
Address 130 CLARKSON LANE
City-State-Zip: VERO BEACH FL 32963

Title SEC
Name MEYER, TED
Address 2235 WINWARD WAY
City-State-Zip: VERO BEACH FL 32963

Title VP
Name SCULLY, BILL
Address 771 MANATEE COVE
City-State-Zip: VERO BEACH FL 32963

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEIDEMARIE S WAXLAX**PRESIDENT****03/15/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date