

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 01, 2010  
Secretary of State**

DOCUMENT# 203388

Entity Name: RIVERS BUS SALES, INC.

**Current Principal Place of Business:**

10626 GENERAL AVE  
JACKSONVILLE, FL 32220

**New Principal Place of Business:**

**Current Mailing Address:**

10626 GENERAL AVE  
JACKSONVILLE, FL 32220

**New Mailing Address:**

FEI Number: 59-0815577      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHAFFER, LAWRENCE H  
9002 CAMSHIRE DR  
JACKSONVILLE, FL 32244      US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHAFFER, LAWRENCE H  
Address: 9002 CAMSHIRE DR.  
City-St-Zip: JACKSONVILLE, FL 32244

Title: S  
Name: CRAIG, JENNIFER M  
Address: 10623 GRAYSON CT  
City-St-Zip: JACKSONVILLE, FL 32220

Title: V  
Name: MCCULLOUGH, MICHAEL E  
Address: 10650 GRAYSON ST  
City-St-Zip: JACKSONVILLE, FL 32220

Title: V  
Name: RASHAW, CRAIG S  
Address: 1738 DUPREE DR  
City-St-Zip: JACKSONVILLE, FL 32221

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

SIGNATURE: JENNIFER CRAIG

S

04/01/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date