


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90206 033 \*\*\*\*70.00

DOCUMENT # N02000007188					
1. Entity Name RIVIERA BEACH FAMILY RESOURCE CENTER, INC...					
Principal Place of Business 1901 BROADWAY RIVIERA BEACH, FL 33404		Mailing Address 1901 BROADWAY RIVIERA BEACH, FL 33404			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 54-2077233	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CLEMENTINA, BUTLER 865 W 2ND STREET RIVIERA BEACH, FL 33404				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILLIAMS, BARBARA		NAME		
STREET ADDRESS	1508 W 30TH STREET		STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BEACH, FL 33404		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BUTLER, CLEMEMENTINE		NAME	Butler, Clementine	
STREET ADDRESS	865 W 2ND ST		STREET ADDRESS	865 W. 2nd St	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404		CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	D	<input type="checkbox"/> Delete	TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JAMES, THOMAS		NAME	Thomas James	
STREET ADDRESS	9121D SW 20TH ST		STREET ADDRESS	9121 D SW 20th St	
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP	Boca Raton, FL 33428	
TITLE	D	<input type="checkbox"/> Delete	TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEAN, KELVIN		NAME	Bean, Kelvin	
STREET ADDRESS	915 OLD DIXIE HWY		STREET ADDRESS	915 Old Dixie Hwy	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404		CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	ST	<input checked="" type="checkbox"/> Delete	TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	NEWBOLD, JEROLINE		NAME	Brooks, Geneva	
STREET ADDRESS	1525 W 36TH ST		STREET ADDRESS	1556 W. 32nd St	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404		CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BUSH, EDITH		NAME		
STREET ADDRESS	1444 8TH STREET		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33401		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Clementina W Butler</u>			Date: <u>1-14-08</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		