

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704674

FILED
Apr 05, 2019
Secretary of State
8199320537CC

Entity Name: ANDOVER CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

20630 N. MIAMI AVENUE
MIAMI GARDEN, FL 33169

Current Mailing Address:

20630 N. MIAMI AVENUE
MIAMI GARDENS, FL 33169 US

FEI Number: 65-0196187

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARRIBAS, MARLENE
20630 N. MIAMI AVENUE
MIAMI GARDENS, FL 33169 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: MARLENE ARRIBAS

04/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NELSON, LIONEL
Address 20650 N MIAMI AVENUE
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name JACKSON, MARY
Address 740 NW 207TH ST.
City-State-Zip: MIAMI GARDENS FL 33169

Title TREASURER
Name FULLERTON, ERVINE
Address 1010 NW 203RD ST
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name ARRIBAS, MARLENE
Address 20630 N. MIAMI AVE
City-State-Zip: MIAMI GARDENS FL 33169

Title SECRETARY
Name GREEN, PATSY
Address 950 NW 203RD ST
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name LAWRENCE, LONNIE
Address 831 NW 207 ST
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name WATSON, BARBARA
Address 1240 NW 207 STREET
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name ROWE, INEZ
Address 20721 NW MIAMI COURT
City-State-Zip: MIAMI GARDENS FL 33169

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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: MARLENE ARRIBAS

REGISTERED AGENT

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROBERTS, PATRICIA
Address 1525 NW 203 ST
City-State-Zip: MIAMI GARDENS FL 33169