2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736389

Entity Name: RIVERSIDE BAPTIST CHURCH OF MIAMI-DADE COUNTY,

FLORIDA, INC.

Current Principal Place of Business:

10775 SW 104 ST MIAMI, FL 33176

Current Mailing Address:

10775 SW 104 ST MIAMI, FL 33176

FEI Number: 59-0737902 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FIGUEROA, IVAN 10775 SW 104 ST MIAMI, FL 33176 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: IVAN FIGUEROA 02/03/2017

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **TREASURER** Title **SECRETARY** Name HUXFORD, JOHN C Name CLAPP, DANIEL Address 9765 SW 146 ST Address 8227 SW 163 COURT City-State-Zip: MIAMI FL 33176 City-State-Zip: MIAMI FL 33193

Title ASSISTANT TREASURER Title **CHAIRMAN**

DRAKE, CAROL Name WOLFE, ELLEN Name

Address 10825 SW 91 LANE Address 12020 SW 106 STREET

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33176

Title ASSISTANT TREASURER Title ASSISTANT TREASURER

Name DORSEY, NERY Name OWERS, ROBERT

Address 17801 SW 152 COURT Address 11224 SW 134 TERRACE

City-State-Zip: MIAMI FL 33187 City-State-Zip: MIAMI FL 33176-5336

Title TRUSTEE Title VICE CHAIRMAN

Name LEON, GUILLERMO Name ASTIGARRAGA, EDWARD Address

13770 SW 114 TERRACE Address 8840 SW 148 STREET

City-State-Zip: MIAMI FL 33186 MIAMI FL 33176 City-State-Zip:

Continues on page 2

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: CAROL DRAKE

ASSISTANT TREASURER

02/03/2017

FILED Feb 03, 2017

Secretary of State

CC6937921323

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TRUSTEE Title TRUSTEE

Name OLIVER, JOHNNY Name LARSON, CARL

Address 15420 PALMETTO LAKE DRIVE Address 9445 SW 78 STREET

City-State-Zip: MIAMI FL 33157 City-State-Zip: MIAMI FL 33173