## 2016 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 03/10/2016

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **CHAIRMAN** 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 **TREASURER** 

DRAKE, CAROL Name VALDES, FERNANDO Name

Address 9519 SW 154 PL Address 12020 SW 106 STREET

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33196

Title ASSISTANT TREASURER Title ASSISTANT TREASURER Name URQUHART, HYACINTH

Name OWERS, ROBERT

Address 14061 SW 120 CT Address 11224 SW 134 TERRACE City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33176-5336

Title TRUSTEE Title VICE CHAIRMAN

Name BRITO, CHARLES L Name ASTIGARRAGA, EDWARD

Address 14250 SW 62 STREET Address 8840 SW 148 STREET

APT#516

MIAMI FL 33176 City-State-Zip: City-State-Zip: MIAMI FL 33183

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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.

03/10/2016 SIGNATURE: JOHN C HUXFORD **CHAIRMAN** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Mar 10, 2016

**Secretary of State** 

CC6876807271

## Officer/Director Detail Continued:

Title TRUSTEE Title TRUSTEE

Name ISAACKS, RUSSELL E Name LARSON, CARL

 Address
 8965 SW 115 TERRACE
 Address
 9445 SW 78 STREET

 City-State-Zip:
 MIAMI FL 33176
 City-State-Zip:
 MIAMI FL 33173