2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 10, 2009 **DOCUMENT#736389** Secretary of State

Entity Name: RIVERSIDE BAPTIST CHURCH OF DADE COUNTY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

10775 SW 104 ST MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

10775 SW 104 ST MIAMI, FL 33176

FEI Number: 59-0737902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WILLIAMS, EUGENE E 9130 S. DADELAND BLVD., #1100 MIAMI, FL 33156

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

CARPENTER, DE LARIS Name: Name: 27101 SW 142 AVE Address: Address: HOMESTEAD, FL 33032 City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: ESKOLIN, NEIL Name: ROBINSON, MARK

Address: 11405 SW 104 CT Address: 12084 SW 117 TER City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33186

Title: SEC () Delete Title: SEC (X) Change () Addition WALKER, CAVELL

NOBLE, DAVID Name: Name: Address: 6221 SW 107 AVE Address: 1120 NW 184 PL

City-St-Zip: MIAMI, FL 33173 City-St-Zip: PEMBROKE PINES, FL 33029

Title: **TRES** (X) Delete Title: () Change () Addition Name:

SELLARS, LEWIS JR Name: Address: 6525 SW 61 ST Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARK ROBINSON VP 11/10/2009