

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751222

**FILED**  
**Mar 17, 2010**  
**Secretary of State**

**Entity Name:** THE CHILD CARE CENTER, INC., RIVIERA PRESBYTERIAN CHURCH

**Current Principal Place of Business:**

5275 SUNSET DR  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

5275 SUNSET DR  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 59-1979509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADMIRE, JACK G  
2511 PONCE DE LEON BLVD STE 320  
CORAL GABLES, FL 33134 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: EDD  
Name: KERMES, THOMAS  
Address: 10160 SW 139 CT  
City-St-Zip: MIAMI, FL 33186

Title: EDD  
Name: GERMAN, VIVIAN  
Address: 17001 SW 88 AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: ATD  
Name: PRIETO, BARBARA  
Address: 15074 SW 63 ST  
City-St-Zip: MIAMI, FL 33193

Title: PD  
Name: ADAMS, ROBERTSON  
Address: 6605 SW 55 LANE  
City-St-Zip: MIAMI, FL 33155

Title: VPD  
Name: SCHOENBLATT, TRACEY  
Address: 4600 SW 67 AVE #149  
City-St-Zip: MIAMI, FL 33155

Title: TD  
Name: POPHAM, EVA  
Address: 7101 SW 67 AVE  
City-St-Zip: MIAMI, FL 33143

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: VIVIAN GERMAN

EDD

03/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date