

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000006976

1. Entity Name

RIVIERA NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

Mailing Address

6625 NERVIA ST.
CORAL GABLES FL 33146

6625 NERVIA ST.
CORAL GABLES FL 33146

2. Principal Place of Business

3835 Utopia Court

3. Mailing Address

P.O. Box 43-0825

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coconut Grove, FL

City & State

South Miami, FL

4. FEI Number

65-1148228

Applied For

Not Applicable

Zip

33133

Country

USA

Zip

33243-0825

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIBBS, W. TUCKER
3835 UTOPIA CT.
COCONUT GROVE FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME BLACKWELL, SAMUEL WAYNE
STREET ADDRESS 6625 NERVIA ST.
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE D ☐ Change ☒ Addition
NAME Blanche Mortenson
STREET ADDRESS 1325 San Ignacio Avenue
CITY-ST-ZIP Coral Gables, FL 33146

TITLE D ☐ Delete
NAME WRIGHT, ANNETTE
STREET ADDRESS 6630 TARREGA ST.
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE D/S ☒ Change ☐ Addition
NAME Wright, Annette
STREET ADDRESS 6630 Tarrega Street
CITY-ST-ZIP Coral Gables, FL 33146

TITLE D ☐ Delete
NAME CORDOVI, MARGARITA G
STREET ADDRESS 1330 SAN REMO AVE.
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE D/P ☒ Change ☐ Addition
NAME Cordovi, Margarita G
STREET ADDRESS 1330 San Remo Avenue
CITY-ST-ZIP Coral Gables, FL 33146

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D/VP ☐ Change ☒ Addition
NAME Forbes, JoAnn
STREET ADDRESS 1212 S. Alhambra Circle
CITY-ST-ZIP Coral Gables, FL 33146

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D/T ☐ Change ☒ Addition
NAME Chetwood, Susan E
STREET ADDRESS 6612 Tarrega Street
CITY-ST-ZIP Coral Gables, FL 33146

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan E. Chetwood* Susan E. Chetwood

April 2, 2002



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)