

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009446

FILED
Mar 20, 2009
Secretary of State

Entity Name: RILEY & SCHWEITZER FOUNDATION INC

Current Principal Place of Business:

270 N W 183RD STREET
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

270 N W 183RD STREET
MIAMI, FL 33169

New Mailing Address:

FEI Number: 26-4466943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RILEY, PATRICIA
1350 S. BISCAYNE POINT ROAD
MIAMI BEACH, FL 33141 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: P, S () Delete
Name: RILEY, PATRICIA M
Address: 1350 S BISCAYNE POINT ROAD
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: PRESTON, PRISCILLA V
Address: 270 N W 183RD STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: SCHWEITZER, GEORGE M
Address: 270 N W 183RD STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: READON, CARRIE
Address: 270 N W 183RD STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: WILLIAMS, VERNITA
Address: 270 N W 183RD STREET
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PATRICIA RILEY

P.S.

03/20/2009

Electronic Signature of Signing Officer or Director

Date