

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

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FILED

13 AUG -6 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2ED37B (1/11)

DOCUMENT #109000002040

1. Entity Name

RIVERSIDE UNITED CHURCH OF CHRIST



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2. Principal Place of Business - No P.O. Box #

2858 POST STREET

3. Mailing Address

STATE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JACKSONVILLE, FL

City & State

4. FEI Number

51-059-4916

Applied For

Not Applicable

Zip

32205

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

7. Name and Address of Current Registered Agent

Name

WHWW, INC

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

390 NORTH ORANGE AVENUE

SUITE 1500

City

ORLANDO

FL

Zip Code

32801

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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, I am familiar with, and accept the obligations of registered agent

SIGNATURE

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

(NOTE: Registered Agent signature required when an individual)

DATE

FEE IS \$61.25

Initial or Amended AR
Make Check Payable to
Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

E-mail Address:

LDGIRLOUX@aol.com

E-mail address to be used for future annual report notices.

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	LINDA D. GIROUX
STREET ADDRESS	1729 DOGWOOD PARK
CITY-STATE-ZIP	JACKSONVILLE, FL 32210
TITLE	D
NAME	BRAD McCULLOUGH
STREET ADDRESS	3011 RIVERSIDE AVENUE
CITY-STATE-ZIP	JACKSONVILLE, FL 32205
TITLE	D
NAME	DELORE GARNER
STREET ADDRESS	2793 PALMS ST.
CITY-STATE-ZIP	JACKSONVILLE, FL 32205
TITLE	D
NAME	SCOTT RUSSELL
STREET ADDRESS	7027 DELISLE DRIVE
CITY-STATE-ZIP	JACKSONVILLE, FL 32043
TITLE	D
NAME	SHERI ADILLA
STREET ADDRESS	3008 RIVERSIDE AVENUE
CITY-STATE-ZIP	JACKSONVILLE, FL 32205
TITLE	D
NAME	DEXA VERA
STREET ADDRESS	7121 RIDGE GLEN COURT
CITY-STATE-ZIP	JACKSONVILLE, FL 32216

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 on an attachment with an address, with all other like empowered officers or directors that also information submitted in a document to the Department of State constitutes a third degree felony as provided for in 817.155 F.S.

SIGNATURE

Rev. Linda D. Giroux

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/2014 (904) 710-4999



Corporations

Payments

Tools

Activity

Information

rvarnadore

Annual Report Filing History

Search By Document ID

N09000002040

Search

Session

Transaction ID	Description	Filing Stage
n09000002040-0c98ffeb-cac1-4dc7-b89b-c59f8753c9da	Session file for N09000002040 with last modified date of 8/6/2013 10:19:04 AM Eastern Standard Time	PaymentPage

Transactions

Transaction Id	Document Id	Filing Fee	Filing Status	Filing Date
90295cf6-3805-4916-a3d1- adc157dd7523	N09000002040	0	2	9/12/2012 12:00:00 AM
92c07813-330f-49e3-acc2- c5e2fed023dd	N09000002040	0	2	4/27/2011 12:00:00 AM
e4f3290b-e48b-4f40-8468- f9a49af8a96e	N09000002040	0	2	9/16/2010 12:00:00 AM
n09000002040-0c98ffeb-cac1-4dc7- b89b-c59f8753c9da	N09000002040	61.25	0	8/6/2013 10:19:06 AM

