

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE FILING DATE: \$250.00.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Chern
Secretary
DIVISION OF CORPORATIONS

DOCUMENT # N49382 (7)
1. Corporation Name
NORTHWEST RIVIERA BEACH COMMUNITY REDEVELOPMENT
CORPORATION

Principal Place of Business

Mailing Address

1615 31ST STREET
RIVIERA BEACH FL 33404

P.O. BOX 10366
RIVIERA BEACH FL 33419

2. Principal Place of Business NABCR

2a. Mailing Address

21 2001 BROADWAY

2b. Suite, Apt. #, etc.

22 Suite, Apt. #, etc. 501

27 Suite, Apt. #, etc.

23 City & State RIVIERA BEACH, FL

28 City & State

24 Zip 33404 Country Palm Beach

29 Zip

30 Country

9. Name and Address of Current Registered Agent

LAWRENCE, SHAWNEE
4243 NORTHLAKE BLVD.
SUITE B
PALM BEACH GARDENS FL 33410

REINSTATEMENT 96

3. Date Incorporated or Qualified 06/16/1992	3a. Date of Last Report 06/29/1995
4. FEI Number 05-0352401	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$0.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

10. Name and Address of New Registered Agent

81 Name Lawrence, Shawnee
82 Street Address (P.O. Box Number is Not Acceptable)
1010 W 4th Street
83 200002012162--8
84 City RIVIERA BEACH
11/22/96-01027-004
***175.00L ***175.00

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Shawnee Lawrence

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Oct 29, 1996

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	BASS, WARREN A. SR.	
STREET ADDRESS	1615 31ST STREET W.	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	D	DELETE
NAME	GANEY, CHARLES	
STREET ADDRESS	1206 W 28TH ST	
CITY-ST-ZIP	RIVIERA BEACH FL	
TITLE	PD	DELETE
NAME	GIBSON, DONALD E.	
STREET ADDRESS	4111-B WOOD SEDGE CIRCLE	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	
TITLE	VD	DELETE
NAME	LOVETT-LOYD, WANDA	
STREET ADDRESS	2060 AVE. H. WEST	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	VD	DELETE
NAME	AUGUSTE, CATHY	
STREET ADDRESS	1326 W. 31ST ST.	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Bass, Warren A. SR.	
1.3 STREET ADDRESS	1615 31st Street W.	
1.4 CITY-ST-ZIP	Riviera Beach, FL 33404	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	PS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Saunders, Harriet H	
3.3 STREET ADDRESS	1249 W 34th St	
3.4 CITY-ST-ZIP	Riviera Beach, FL 33404	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Sandra Lovett	
5.3 STREET ADDRESS	1364 W 28th Street	
5.4 CITY-ST-ZIP	Riviera Beach, FL 33404	
6.1 TITLE	Sec.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Shawnee Lawrence	
6.3 STREET ADDRESS	1010 W 4th Street	
6.4 CITY-ST-ZIP	Riviera Beach, FL 33404	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment within address.

SIGNATURE:

Wanda Lovett Lloyd

6/11/96
11/14/96

(561-2451147)
11/14/96
001117

CR2037 (3/96)