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FILED

May 05 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N49382** (7)

1. Corporation Name

**NORTHWEST RIVIERA BEACH COMMUNITY REDEVELOPMENT  
CORPORATION**

Principal Place of Business

Mailing Address

**2001 BROADWAY  
NRBCRC  
RIVIERA BEACH FL 33404**

**P.O. BOX 10568  
RIVIERA BEACH FL 33419**

3. Date Incorporated or Qualified

**06/16/1992**

4. FEI Number

**65-0352491**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 **SUITE 501**

27 City & State

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution



**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?



Yes



No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LAWRENCE, SHAWNEE  
1010 W 4TH STREET  
RIVIERA BEACH FL 33404**

81 Name

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

83

84 City

**FL**

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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*

(NOTE: Registered Agent signature required when reinstating)

DATE

*April 22, 1998*

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE  
NAME **PICKENS, HENRY**  
STREET ADDRESS **525 SILVER BEACH RD**  
CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE **CD** ☐ DELETE  
NAME **GANEY, CHARLES**  
STREET ADDRESS **1208 W 28TH ST**  
CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE **TD** ☐ DELETE  
NAME **LOVETT-FLOYD, WANDA**  
STREET ADDRESS **2080 AVE. H. WEST**  
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE **D** ☐ DELETE  
NAME **LOVETT, SANDRA**  
STREET ADDRESS **1364 W. 28TH STREET**  
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE **T** ☐ DELETE  
NAME **RUSSELL, DARLENE**  
STREET ADDRESS **1808 PINEHURST DR**  
CITY-ST-ZIP **W PALM BEACH FL**

TITLE **D** ☐ DELETE  
NAME **RICKS, DEBORACH**  
STREET ADDRESS **4400 CONGRESS AVE**  
CITY-ST-ZIP **W PALM BEACH FL**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 with an address.

SIGNATURE:

*Shawnee Lawrence*

*(561) 845-1147*

CR2E037 (10/97)