

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N49382

FILED
Nov 13, 2009
Secretary of State

Entity Name: NORTHWEST RIVIERA BEACH COMMUNITY REDEVELOPMENT CORPORATION

Current Principal Place of Business:

2001 BROADWAY
SUITE 510
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10566
RIVIERA BEACH, FL 33419

New Mailing Address:

FEI Number: 65-0352491 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AMBROISE, SCHILER
2910 CARVELLE DR
RIVIERA BEACH, FL 33404 US

Name and Address of New Registered Agent:

AMBROISE, SCHILLER
2910 CARVELLE DR
RIVIERA BEACH, FL 33404 US

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: SCHILLER AMBROISE

11/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BURRS, WILLIAM H
Address: 1500 30TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: SECR () Delete
Name: BROOKS, LASHEA
Address: 1349 W 35TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: TRES () Delete
Name: GADSON, WANDA
Address: 145 NW. 10TH AVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: DIR () Delete
Name: MADYUN, YUALANDA
Address: 1327 W 10TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: DIR () Delete
Name: PAIGE ANDERSON, HEATHER
Address: 328 NORTHLAKE BLVD
City-St-Zip: LAKE PARK, FL 33408

Title: DIR () Delete
Name: DAIN, ESMERILDA
Address: 2915 R AVE
City-St-Zip: RIVIERA BEACH, FL 33404

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
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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: SCHILLER AMBROISE

MR.

11/13/2009

Electronic Signature of Signing Officer or Director

Date