

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90079 032 ****61.25

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DOCUMENT # N94000004256

1. Corporation Name

RIVERLAND CIVIC ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 365
FT. LAUDERDALE FL 33312

Mailing Address

P.O. BOX 365
FT. LAUDERDALE FL 33312



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

08/25/1994

4. FEI Number

65-0080219

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

NIEDERRITER, VIRGIL
104 SW 21 WAY
FT. LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **HUTCHINSON, ROBERT**
STREET ADDRESS **429 SW 25 TERRACE**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **D** ☒ DELETE
NAME **DAVIS, VERA**
STREET ADDRESS **2648 SW 7TH STREET**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ DELETE
NAME **WYRIER, ERROL**
STREET ADDRESS **2505 SW 9TH CT**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **P** ☐ DELETE
NAME **NIEDERRITER, VIRGIL**
STREET ADDRESS **104 SW 21ST WAY**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VP** ☒ DELETE
NAME **MUNIZ, FRED**
STREET ADDRESS **2648 SW 7TH STREET**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **S** ☒ DELETE
NAME **SMITH, GEORGE**
STREET ADDRESS **124 SW 21ST WAY**
CITY-ST-ZIP **FT. LAUDERDALE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE **Director** ☒ Change ☐ Addition
2.2 NAME **Susan K Ruthaupt**
2.3 STREET ADDRESS **124 SW 24 AVE.**
2.4 CITY-ST-ZIP **Ft. Lauderdale FL 33312**

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 **Vice President** ☒ Change ☐ Addition
5.2 NAME **Dorothy Novotny**
5.3 STREET ADDRESS **2532 SW 7th St.**
5.4 CITY-ST-ZIP **FL 33312**

6.1 TITLE **Secretary** ☒ Change ☐ Addition
6.2 NAME **Margie Parrish**
6.3 STREET ADDRESS **2081 SW 6th St**
6.4 CITY-ST-ZIP **Ft. Lauderdale FL 33312**

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-26-99 954-791-5896

CR2E037 (11/98)