

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

1

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



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

FILED

97 NOV 17 AM 10:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **N96000006285 (8)**

1. Corporation Name

**RIVIERA COMMUNITY DEVELOPMENT OUTREACH PROGRAM,  
INC.**

Principal Place of Business

Mailing Address

**1417 10TH ST W  
RIVIERA BEACH FL 33407**

**1417 10TH ST W  
RIVIERA BEACH FL 33407**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/09/1996**

3a. Date of Last Report

4. FEI Number

☒ 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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HERRING, MERRY  
1417 10TH ST W  
RIVIERA BEACH FL 33407**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME **DP  
HERRING, MERRY**  
STREET ADDRESS **1417 10TH ST W**  
CITY-ST-ZIP **RIVIERA BEACH FL 33407**

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

**100002353421--6**  
**-11/20/97--01097--004**

**\*\*\*\*\*61.25 \*\*\*\*\*61.25**

TITLE ☐ DELETE

2.1 TITLE

NAME **DS  
HERRING, BRUCE**  
STREET ADDRESS **1417 10TH ST W**  
CITY-ST-ZIP **RIVIERA BEACH FL 33407**

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE

NAME **DT  
WILSON, JAMES**  
STREET ADDRESS **1114 9TH ST**  
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 *[Signature]*

CR2E037 (4/97)

②  
Riviera Community Development  
Outreach Program, Inc.  
1417 10<sup>th</sup> St W  
Riviera Beach Fl, 33464

Fla Dept of State  
Division of Corps  
P O Box 6327  
Tallahassee, Fl. 32314  
Nov 12, 1997

Re: Non-profit Corporation- Annual Report

This letter comes to explain that I am just receiving these Report Papers Because the name was so new that the Postman had a problem with delivery. It wind up at City Hall of Riviera Bch. After many months some-one opened it and called me immediately. After speaking to a staff member in your <sup>office</sup> I am sending the check for \$61.25. Thank you for your consideration and advise. This will not happen again because we are now better know.

Thank you again  
Merry Herring

President, RC DOP, Inc.  
(561) 848-7926