

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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**FILED
Mar 16, 2017
Secretary of State
CC2058804987**

Entity Name: WESTVIEW COMMUNITY ALLIANCE CORPORATION

Current Principal Place of Business:

13301 NORTHWEST 24TH AVENUE
MIAMI, FL 33167

Current Mailing Address:

13301 NORTHWEST 24TH AVENUE
MIAMI, FL 33167

FEI Number: 80-0586713

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENOIR, A.D. REV.
13301 NORTHWEST 24TH AVENUE
MIAMI, FL 33167 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, PRESIDENT
Name LENOIR, SR., A.D. REV.
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

Title CHAIRMAN, VP, DIRECTOR
Name MILIEN, ENOCH DR.
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

Title DIRECTOR
Name JONES, PATTY
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

Title TREASURER, DIRECTOR
Name LENOIR, TIFFANY
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

Title EXECUTIVE SECRETARY,
CORRESPONDING SECRETARY
Name LENOIR, PATRICIA A
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

Title DIRECTOR, TREASURER,
CORRESPONDING SECRETARY
Name LENOIR, SHEBREECEAY D
Address 13301 NORTHWEST 24TH AVENUE
City-State-Zip: MIAMI FL 33167

I hereby 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 all other like empowered.

SIGNATURE: A.D. LENOIR, SR.

PRESIDENT/CEO

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date