

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# N34704

Entity Name: NATIONAL WOMEN'S POLITICAL CAUCUS OF MIAMI-DADE, COUNTY, INC.

Current Principal Place of Business:

3301 NE 5TH AVENUE
#1103
MIAMI, FL 33137 US

New Principal Place of Business:

New Mailing Address:

3301 NE 5TH AVE
1103
MIAMI, FL 33137 US

Current Mailing Address:

POST OFFICE BOX 836033
MIAMI, FL 332836033 US

FEI Number: 59-2682157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOFFE, ROXANNE A.
9990 SW 77TH AVENUE
SUITE 325 THE MARCUS CENTRE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: WAYLAND, ALEXANDRA
Address: 3301 NE 5TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: RAFFERTY, KIT
Address: 150 SE 25TH RD APT 2J
City-St-Zip: MIAMI, FL 33129

Title: SD () Delete
Name: BOVA, JOANN
Address: 18552 SW 89TH PLACE
City-St-Zip: MIAMI, FL 33157

Title: TD () Delete
Name: SCHWARTZ, BARBARA C.
Address: 7920 SW 138TH COURT
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: ENGLAND, EMILY
Address: 13228 SW 108TH STREET CIRCLE
City-St-Zip: MIAMI, FL 331863422

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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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 for the exemption stated in Section 119.07(3)(i), 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: ALEXANDRA E. WAYLAND

CD

04/30/2004

Electronic Signature of Signing Officer or Director

Date