

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006016

FILED  
Apr 10, 2008  
Secretary of State

**Entity Name:** DADE COUNTY MUNICIPAL CLERKS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CITY CLERK'S OFFICE  
500 SW 109 AVENUE  
SWEETWATER, FL 33174

**New Principal Place of Business:**

C/O CITY CLERK'S OFFICE  
790 N. HOMESTEAD BLVD  
HOMESTEAD, FL 33030

**Current Mailing Address:**

C/O CITY CLERK'S OFFICE  
790 N HOMESTEAD BLVD  
HOMESTEAD, FL 33030

**New Mailing Address:**

C/O CITY CLERK'S OFFICE  
790 N. HOMESTEAD BLVD  
HOMESTEAD, FL 33030

**FEI Number:** 65-0635128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHEDD, SHEILA P CMC  
790 N HOMESTEAD BLVD  
HOMESTEAD, FL 33030 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: PD ( ) Delete  
Name: SCHMIDT, MAIRE O CMC  
Address: 500 SW 109 AVENUE  
City-St-Zip: SWEETWATER, FL 33174

Title: S ( ) Delete  
Name: RADER, MEIGHAN J CMC  
Address: 8950 SW 152 STREET  
City-St-Zip: PALMETTO BAY, FL 33157

Title: T ( ) Delete  
Name: SHEDD, SHEILA P CMC  
Address: 790 N HOMESTEAD BOULEVARD  
City-St-Zip: HOMESTEAD, FL 33030

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SHEDD, SHEILA CMC  
Address: 790 N. HOMESTEAD BLVD.  
City-St-Zip: HOMESTEAD, FL 33030

Title: VP (X) Change ( ) Addition  
Name: GRANADO, RAFAEL  
Address: 501 PALM AVENUE  
City-St-Zip: HIALEAH, FL 33011

Title: S (X) Change ( ) Addition  
Name: EASTMAN, DEBRA  
Address: 6853 MAIN STREET  
City-St-Zip: MIAMI LAKES, FL 33014

Title: T ( ) Change (X) Addition  
Name: GARCIA, CARMEN J CMC  
Address: 500 SW 109 AVENUE  
City-St-Zip: SWEETWATER, FL 33174

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: SHEILA P. SHEDD

P

04/10/2008

Electronic Signature of Signing Officer or Director

Date