

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744671

FILED
Apr 09, 2009
Secretary of State

Entity Name: DADE COUNTY VETERINARY FOUNDATION, INC.

Current Principal Place of Business:

751 NE 168 ST
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

751 NE 168 ST
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 59-1911775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNSTEIN, LARRY A
751 NE 168 ST
NORTH MIAMI BEACH, FL 33162 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: TD () Delete
Name: BERNSTEIN, LARRY A
Address: 751 NE 168 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: PD () Delete
Name: SARDINAS, JUAN
Address: 8601 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: GERARDO, DIAZ
Address: 10427 S. DIXIE HWY
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: HOUSEHOLDER, LAURIE
Address: 15301 S DIXIE HWY
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: FERNANDES, PETER
Address: 7005 WEST 4TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: D () Delete
Name: JULIO, IBANEZ
Address: 10575 SW 186TH ST
City-St-Zip: MIAMI, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
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 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: LARRY BERNSTEIN

TD

04/09/2009

Electronic Signature of Signing Officer or Director

Date