# 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 714409** 

Entity Name: DADE AMATEUR GOLF ASSOCIATION, INC.

FILED
May 04, 2019
Secretary of State
7967294859CC

### **Current Principal Place of Business:**

1802 NW 37 AVENUE MIAMI, FL 33125

# **Current Mailing Address:**

9100 S DADELAND BLVD SUITE 912 MIAMI, FL 33156

FEI Number: 23-7069300 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

VARGAS, ANTONIO 9100 S DADELAND BLVD SUITE 912 MIAMI, FL 33156 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:

TitlePRESIDENT, DIRECTORTitleVP, DIRECTORNameDE LUCCA, CHARLES A. JR.NameREED, JOHN

Address 29710 SW 183RD COURT Address 16021 E. TROON CIRCLE

City-State-Zip: HOMESTEAD FL 33030 City-State-Zip: MIAMI LAKES FL 33014-6554

Title VP, DIRECTOR Title SECRETARY, DIRECTOR

Name DE LUCCA, CHARLES III Name VELEZ, CARLOS

Address 6840 QUEEN PALM TERRACE Address 9135 SW 123 STREET

City-State-Zip: MIAMI LAKES FL 33014 City-State-Zip: MIAMI FL 33186

Title DIRECTOR Title DIRECTOR

Name STERN, MICHAEL Name TONINO, MICHAEL

Address 253 NE 2ND STREET Address 463 MENDON ROAD

APT. #1710 City-State-Zip: ATTLEBORO MA 02703

City-State-Zip: MIAMI FL 33132

Title TREASURER, DIRECTOR

Name MIGUEL, ANDY

Address 2370 SW 19TH STREET

City-State-Zip: MIAMI FL 33145

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: JOHN REED DIRECTOR 05/04/2019