	DOCUMENT# N07000000491					
	Entity Name: SOUTH FLORIDA COMMUNITY DEVELOPMENT COALITION, INC.					
Current Principal Place of Business:						
	300 NW 12TH AVE					

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

MIAMI, FL 33128-1019

300 NW 12TH AVE MIAMI, FL 33128-1019

FEI Number: 45-0553449

Name and Address of Current Registered Agent:

LEGAL SERVICES OF GREATER MIAMI, INC. 3000 BISCAYNE BLVD SUITE# 500 MIAMI, FL 33137 US

The above nemed entity submits this statement for the surgers of abanding its registered affine or registered agent, or both in the State of Elevide

SIGNATURE	🗄 SHAHRZAD EMAMI, ESQ.			04/14/2018
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	D	Title	D	
Name	SHANK, ARDEN	Name	ROJAS, JUAN	
Address	300 NW 12TH AVE	Address	300 NW 12TH AVE	
City-State-Zip:	MIAMI FL 33128-1019	City-State-Zip:	MIAMI FL 33128-1019	
Title	CEO	Title	D	
Name	BROWN, SHEKERIA	Name	RASHID, JS S	
Address	300 NW 12TH AVE	Address	300 NW 12TH AVE	
City-State-Zip:	MIAMI FL 33128	City-State-Zip:	MIAMI FL 33128	
Title	DT	Title	D.	
Name	COTO, MARIA	Name	BLACK, ELAINE	
Address	3000 BISCAYNE BLVD	Address	4800 NW 12TH AVE	
City-State-Zip:	SUITE 215 MIAMI FL 33137	City-State-Zip:	MIAMI FL 33127	
		Title	D	
Title	D.	Name	MAYER, DOUG	
Name	DILLER, SAM	Address	2130 NW 13TH ST	
Address	181 NE 82ND ST	City-State-Zip:	MIAMI FL 33125	
City-State-Zip:	MIAMI FL 33138	,		
		- ·	-	

Continues on page 2

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: SHEKERIA BROWN

04/14/2018 EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

FILED Apr 14, 2018 Secretary of State CC0971013768

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	DVP	Title	D
Name	SONORA, MYRNA	Name	CASTILLA, ANA
Address	2315 NW 107TH AVE #1M17	Address	255 ALHAMBRA CIRCLE 2ND FLOOR
City-State-Zip:	DORAL FL 33172	City-State-Zip:	CORAL GABLES FL 33143
Title	D	Title	DP
Name	CRUZ, MARY ANN	Name	BEESING, GRETCHEN
Address	12496 NW 25TH STREET	Address	3000 BISCAYNE BLVD, SUITE 210
City-State-Zip:	DORAL FL 33182	City-State-Zip:	MIAMI FL 33137
Title	D	Title	D
Name	BERMAN-EISENBERG, STEPHANIE	Name	SEALS, SANDRA
Address	1398 SW 1ST ST.	Address	300 NW 12TH AVE
	#1201	City-State-Zip:	MIAMI FL 33128-1019
City-State-Zip:	MIAMI FL 33135		
Title	D		
Name	PEREZ-FERREIRO, VALERIA		

- Address 201 SOUTH BISCAYNE BOULEVARD 10TH FLOOR
- City-State-Zip: MIAMI FL 33131