

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000007945

**FILED**  
**May 01, 2021**  
**Secretary of State**  
**7451400575CC**

**Entity Name:** FLORIDA DEMOCRATIC LEAGUE, INC.

**Current Principal Place of Business:**

425 NW 27 AVENUE  
#0751  
MIAMI, FL 33135-0751

**Current Mailing Address:**

POB 350751  
MIAMI, FL 33135-0751 US

**FEI Number:** 37-1582128

**Certificate of Status Desired:** No

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

GARCIA, ALFREDO  
425 NW 27 AVENUE  
#0751  
MIAMI, FL 33135-0751 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:** ALFREDO GARCIA

05/01/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            RODRIGUEZ, MANUEL  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            VP, DIRECTOR  
Name            WILCOX, NATHANIEL  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            DIRECTOR  
Name            GONZALEZ, MIRIAM  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            DIRECTOR  
Name            MOLINA, MARTA  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            SECRETARY, DIRECTOR  
Name            ARMESTO, ELADIO JOSE  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            DIRECTOR  
Name            VARONA, NELSON J  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            DIRECTOR  
Name            GARCIA, ALFREDO  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

Title            DIRECTOR  
Name            FONSECA, CLARA  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751

**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:** MANUEL RODRIGUEZ

PRESIDENT

05/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            PEREZ, LUISA  
Address        POB 350751  
City-State-Zip: MIAMI FL 33135-0751