

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000008499

Entity Name: MIAMI-DADE URBAN DEBATE LEAGUE, INC.**Current Principal Place of Business:**2525 PONCE DE LEON BLVD, STE 700
CORAL GABLES, FL 33134**Current Mailing Address:**2525 PONCE DE LEON BLVD, STE 700
CORAL GABLES, FL 33134**FEI Number:** 47-5182053**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REED, DALE
2434 EAST LAS OLAS BLVD
FORT LAUDERDALE, FL 33301 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:** DALE REED

06/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SCHULMAN, CLIFFORD A
Address 2525 PONCE DE LEON BLVD, STE 700
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR, TREASURER
Name REED, M DALE
Address LAS OLAS RIVERFRONT
2434 EAST LAS OLAS BLVD
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name HARRISON, MALOU
Address 2525 PONCE DE LEON BLVD, STE 700
City-State-Zip: CORAL GABLES FL 33134

Title CHAIRMAN
Name GRAY, COREY T LTC, USAR
Address 401 E. LAS OLAS BLVD.
1200
City-State-Zip: FORT LAUDERDALE FL 33301

Title D
Name PEREZ, ARNALDO
Address 3655 NW 87TH AVE
City-State-Zip: MIAMI FL 33178-2428

Title DIRECTOR
Name STEINBERG, DAVID
Address 2525 PONCE DE LEON BLVD, STE 700
City-State-Zip: CORAL GABLES FL 33134

Title CHAIRMAN
Name PEREZ, RICHARD A
Address 701 BRICKELL AVE
3300
City-State-Zip: MIAMI FL 33131

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: M DALE REED

TREASURER

06/17/2020

Electronic Signature of Signing Officer/Director Detail

Date