

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000009456

**Entity Name:** FLORIDA ASSOCIATION OF CRIMINAL DEFENSE LAWYERS  
MIAMI CHAPTER, INC.**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**3687234734CC****Current Principal Place of Business:**147 SEVILLA AVE  
CORAL GABLES, FL 33134**Current Mailing Address:**147 SEVILLA AVE  
CORAL GABLES, FL 33134 US**FEI Number: 59-2132688****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ESTLUND, MICHELLE  
147 SEVILLA AVE  
CORAL GABLES, FL 33134 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 :**

Title	PRESIDENT
Name	ESTLUND, MICHELLE
Address	147 SEVILLA AVENUE SUITE 304
City-State-Zip:	CORAL GABLES FL 33134

Title	PRESIDENT ELECT
Name	MEYERS, MATTHEW
Address	2103 CORAL WAY SUITE 306
City-State-Zip:	MIAMI FL 33145

Title	TREASURER
Name	DAVIS, MICHAEL
Address	100 SE 2ND ST SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	SECRETARY
Name	WAXMAN, ABBIE
Address	1320 NW 14TH STREET
City-State-Zip:	MIAMI FL 33125

Title	VICE PRESIDENT
Name	HELLMAN, KEVIN
Address	1320 NW 14TH STREET
City-State-Zip:	MIAMI FL 33125

*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: ABBIE WAXMAN****SECRETARY****01/17/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date