

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000629

Entity Name: ECONOMIC DEVELOPMENT COUNCIL OF SOUTH MIAMI-
DADE, INC.**Current Principal Place of Business:**28801 SW 157 AVE
HOMESTEAD, FL 33033**Current Mailing Address:**P. O. BOX 344217
HOMESTEAD, FL 33034-9583 US**FEI Number: 65-0407832****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GREER, LISA M
28801 SW 157 AVE
HOMESTEAD, FL 33033 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: LISA M GREER****01/22/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** CHAIRMAN
Name GREER, LISA
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR
Name BELL, WILBUR
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR
Name MEJIA, MICHELLE
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR
Name ACOSTA, TANIA PHD
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR, TREASURER,
SECRETARY
Name DEPASS, SIOUX
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR
Name ENGLISH, BALDWIN ESQ.
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033**Title** DIRECTOR
Name MILLER, RICHARD
Address 28801 SW 157 AVE
City-State-Zip: HOMESTEAD FL 33033

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: SIOUX DEPASS**SECRETARY/TREASURER 01/22/2021**

Electronic Signature of Signing Officer/Director Detail

Date