

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000629

**Entity Name:** ECONOMIC DEVELOPMENT COUNCIL OF SOUTH MIAMI-DADE, INC.**FILED**  
**Feb 12, 2017**  
**Secretary of State**  
**CC3874914849****Current Principal Place of Business:**10700 CARIBBEAN BLVD  
301A  
CUTLER BAY, FL 33189**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:**INFANTE, RENE  
10700 CARIBBEAN BLVD  
301A  
CUTLER BAY, FL 33189 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: RENE INFANTE****02/12/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** TREASURER  
**Name** GREER, LISA  
**Address** 10700 CARIBBEAN BLVD  
301A  
**City-State-Zip:** CUTLER BAY FL 33189**Title** DIRECTOR  
**Name** DEPASS, SUSAN  
**Address** 10700 CARIBBEAN BLVD  
301A  
**City-State-Zip:** CUTLER BAY FL 33189**Title** DIRECTOR  
**Name** BELL, WILBUR  
**Address** 10700 CARIBBEAN BLVD  
301A  
**City-State-Zip:** CUTLER BAY FL 33189**Title** CHAIRMAN  
**Name** INFANTE, RENE  
**Address** 10700 CARIBBEAN BLVD  
301A  
**City-State-Zip:** CUTLER BAY FL 33189**Title** DIRECTOR  
**Name** PYBAS, DON  
**Address** 10700 CARIBBEAN BLVD  
301A  
**City-State-Zip:** CUTLER BAY FL 33189

*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: LISA GREER****TREASURER****02/12/2017**

Electronic Signature of Signing Officer/Director Detail

Date