

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704257

FILED
Feb 24, 2012
Secretary of State

Entity Name: DADE COUNTY FEDERATION OF WOMEN'S CLUBS

Current Principal Place of Business:

MIAMI WOMAN'S CLUB
1737 N. BAYSHORE DR.
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

20251 SW 272 STREET
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 59-6134539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOSNER, DOYLENE W TRUSTEE
20251 SW 272 ST
HOMESTEAD, FL 33031 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: MCALLISTER, ANN
Address: 19411 SW 308 ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: V
Name: WINGETT, MARY
Address: 1357 SW 151 WAY
City-St-Zip: SUNRISE, FL 33326

Title: 2V
Name: FUCHS, VERONICA
Address: 5932 NE 6TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: 3V
Name: VIZETTE, MAXINE
Address: 1627 BRICKELL AVENUE NO. 1707
City-St-Zip: MIAMI, FL 33129

Title: S
Name: PRIESS, IRENE
Address: 449 SWALLOW DR. NO.3
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: T
Name: LASCH, BETTY
Address: 76 NE 102 STREET
City-St-Zip: MIAMI SHORES, FL 33138

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: DOYLENE LOSNER

TT

02/24/2012

Electronic Signature of Signing Officer or Director

Date