

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707490

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** REALTOR ASSOCIATION OF MIAMI-DADE COUNTY, INC.

**Current Principal Place of Business:**

245 ALCAZAR AVE.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

245 ALCAZAR AVE.  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 59-0977630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BULLMAN, MARTHA J.  
245 ALCAZAR AVE.  
CORAL GABLES, FL 33134 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: CEO  
Name: BULLMAN, MARTHA J  
Address: 245 ALCAZAR AVE.  
City-St-Zip: CORAL GABLES, FL 33134

Title: STD  
Name: LEVINE, JACK  
Address: 7901 LUDLAM RD  
City-St-Zip: MIAMI, FL 33143

Title: PED  
Name: VEGA, ERNESTO  
Address: 2883 EXECUTIVE DR #201  
City-St-Zip: WESTON, FL 33331

Title: PD  
Name: ULLOA, VICTOR  
Address: 11570 SUNSET DR  
City-St-Zip: MIAMI, FL 33173

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: MARTHA J BULLMAN

CEO

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date