2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Apr 30, 2009 **DOCUMENT#714409** Secretary of State

Entity Name: DADE AMATEUR GOLF ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1802 NW 37 AVENUE MIAMI, FL 33125

Current Mailing Address: New Mailing Address:

9100 S DADELAND BLVD SUITE 912 MIAMI, FL 33156

FEI Number: 23-7069300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

VARGAS, ANTONIO 9100 S DADELAND BLVD SUITE 912 MIAMI, FL 33156 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition DE LUCCA, CHARLES A JR. Name: Name:

6840 LOCH NESS DRIVE Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip:

Title: () Delete Title: VP/D (X) Change () Addition

BAIN, GEOFF JR. Name: REED, JOHN Name: Address: 301 ISLA DORADO Address: 1802 NW 37 AVENUE City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: MIAMI, FL 33125

Title: VP/D () Delete Title: () Change () Addition

DE LUCCA, CHARLES III Name: Name: 6840 QUEEN PALM TERRACE Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip:

() Delete Title: VP/D Title: () Change () Addition

MILLER, JAY Name: Name: Address: 7620 N.E. 7TH COURT Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip:

Title: () Delete Title: VP/D (X) Change () Addition

GOODHART, DAVE GOODHART, DAVE Name: Name: 1802 N.W. 37 AVENUE 1802 N.W. 37 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33125

Title: () Delete Title: (X) Change () Addition

SCHWARTZ, ALLAN TONINO, MICHAEL Name: Name: Address: 4545 S.W. 94 COURT Address: 1802 NW 37 AVENUE MIAMI, FL 33165 MIAMI, FL 33125 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES DELUCCA JR. P/D 04/30/2009