

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734107

FILED
Jan 16, 2006
Secretary of State

Entity Name: NORTHWESTERN DADE ASSOCIATION OF REALTORS, INC.

Current Principal Place of Business:

415 W. 51ST PL.
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

415 W. 51ST PL.
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-0904809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, ANGELA R
415 W. 51ST PL.
HIALEAH, FL 33012 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: EO () Delete
Name: RUIZ, ANGELA R
Address: 415 W. 51ST PL
City-St-Zip: HIALEAH, FL 33012

Title: PD () Delete
Name: MACIAS, VIVIAN
Address: 3295 W 4TH AVE
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: FORTICH, JORGE
Address: 1800 W 49TH ST, # 307
City-St-Zip: HIALEAH, FL 33012

Title: VPD () Delete
Name: MACIAS, VIVIAN
Address: 3295 WEST 4TH AVE.
City-St-Zip: HIALEAH, FL 33012

Title: VPD () Delete
Name: GOMEZ, MARIA E
Address: 730 SE 8TH ST, # 105
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: GOMEZ, MARIA E
Address: 730 SE 8 ST #105
City-St-Zip: HIALEAH, FL 33010

Title: TD (X) Change () Addition
Name: RODRIGUEZ, HECTOR
Address: 8024 MIAMI LAKES DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: VPD (X) Change () Addition
Name: BRACKETT, MARIA E
Address: 15271 NW 60 AVE #107
City-St-Zip: MIAMI LAKES, FL 33014

Title: SEC (X) Change () Addition
Name: VALDES, RAFAEL
Address: 15271 NW 60 AVE #107
City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGELA R. RUIZ

EO

01/16/2006

Electronic Signature of Signing Officer or Director

Date