2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# 742269

Entity Name: PROGRESSIVE FIREFIGHTERS ASSOCIATION INC. OF DADE COUNTY

Current Principal Place of Business:

926 RUTLAND ST.
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 540423
OPA LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 59-2395841 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, FAYE
670 N. E. 195 ST.
MIAMI, FL 33179 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 ( ) Delete
Name: DAVIS, FAYE
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

Title: E-B ( ) Delete
Name: LADBN, EDWARD
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

Title: V ( ) Delete
Name: BELL, KEITH
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

Title: T ( ) Delete
Name: RAGIN, WILLIE
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

Title: RSEC ( ) Delete
Name: MORGAN-GRANT, NASOMA
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

Title: E-B ( ) Delete
Name: BRINSON, WILLIE
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: E-B (X) Change ( ) Addition
Name: LADEN, EDWARD
Address: 926 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054 US

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: FAYE DAVIS PRES 01/11/2008

Electronic Signature of Signing Officer or Director — Date