

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757211

FILED
Apr 07, 2009
Secretary of State

Entity Name: DADE EMPLOYMENT AND ECONOMIC DEVELOPMENT CORPORATION

Current Principal Place of Business:

105 SE 12 AVENUE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

105 SE 12 AVENUE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 59-2136202 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, LILLIE M
1180 N.W. 50 STREET
MIAMI, FL 33127 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: CD () Delete
Name: WILLIAMS, LILLIE M
Address: 1180 NW 50 ST
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: PHILLIPS, CAESAR
Address: 70 NE 215TH ST
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: MCKENZIE, WILFRED
Address: 3280 NW 48 TERRACE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LILLIE M. WILLIAMS

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date