

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762157

FILED
Mar 15, 2009
Secretary of State

Entity Name: DANIA ECONOMIC DEVELOPMENT CORPORATION

Current Principal Place of Business:

210 NW 12TH AVE
12
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

P O BOX 694
DANIA, FL 330047694

New Mailing Address:

FEI Number: 59-2298406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COSTELL, WALTON JR ESQ
1339 NE 4TH AVE
SUITE 406
FT LAUDERDALE, FL 33304 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: PC () Delete
Name: GRACE, BOBBIE
Address: 110 NW 8TH AVE.
City-St-Zip: DANIA, FL

Title: DS () Delete
Name: BYRD, EUGENIA
Address: 717 SW 2ND TERRACE
City-St-Zip: DANIA, FL

Title: V () Delete
Name: BLACK, EBBIE
Address: 235 SW 12TH AVE
City-St-Zip: DANIA, FL 33004

Title: D () Delete
Name: WILLIAMS, CHARLES
Address: 712 SW 2ND TERRACE
City-St-Zip: DANIA, FL

Title: D () Delete
Name: PENN, LUCY W
Address: 754 SW 3RD ST
City-St-Zip: DANIA, FL 33004

Title: DT () Delete
Name: JONES, MILDRED
Address: 1451 N.W. 2ND ST.
City-St-Zip: DANIA, 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:

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: JERRY CARTER

D

03/15/2009

Electronic Signature of Signing Officer or Director

Date