2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 21, 2006
Secretary of State

DOCUMENT# 766472

Entity Name: MIAMI-DADE ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS, INC.

Current Principal Place of Business:

9241 SW 54TH PLACE
COOPER CITY, FL 33328

New Principal Place of Business:

Current Mailing Address:

9241 SW 54TH PLACE
COOPER CITY, FL 33328

New Mailing Address:

FEI Number: 59-6151309 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANTUCCI, MAUD MARIE
9241 SW 54TH PLACE
COOPER CITY, FL 33328 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: ED ( ) Delete
Name: SANTUCCI, MAUD MARIE
Address: 9241 SW 54TH PLACE
City-St-Zip: COOPER CITY, FL 33328

Title: P ( ) Delete
Name: GRANT, GERALD C JR
Address: 9130 S. DADELAND BLVD., STE. 1400
City-St-Zip: MIAMI, FL 33156

Title: VP ( ) Delete
Name: ESPINOSA, ALBERTO M
Address: 16221 S.W. 88 STREET
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete
Name: FORGIONE, MARK P
Address: 2 ALHAMBRA PLAZA, STE. 1050
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete
Name: MCMILLAN-SWEET, MARYAM
Address: 4011 OAKWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33020

Title: T (X) Delete
Name: DEMERITTE, EDWIN T
Address: 5301 N.W. 18 AVENUE
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: ESPINOSA, ALBERTO M
Address: 16221 S.W. 88 STREET
City-St-Zip: MIAMI, FL 33196

Title: VP (X) Change ( ) Addition
Name: FORGIONE, MARK P
Address: P. O. BOX 347105
City-St-Zip: CORAL GABLES, FL 33234

Title: VP (X) Change ( ) Addition
Name: DEMERITTE, EDWIN T
Address: 5301 N.W. 18 AVENUE
City-St-Zip: MIAMI, FL 33142

Title: S/T (X) Change ( ) Addition
Name: MEADOWS, LEO C
Address: 18350 N.W. 2 AVE., STE. 300
City-St-Zip: MIAMI, FL 33169

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

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: MAUD MARIE SANTUCCI ED 08/21/2006

Electronic Signature of Signing Officer or Director — Date