

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766472

FILED
Apr 06, 2007
Secretary of State

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: ESPINOSA, ALBERTO M
Address: 16221 S.W. 88 STREET
City-St-Zip: MIAMI, FL 33196

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

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

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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: WOLFE, CHRISTOPHER A
Address: 7840 S.W. 86 ST., STE. 21
City-St-Zip: MIAMI, FL 33143

Title: S (X) Change () Addition
Name: ROBERTS, MARY T
Address: 4011 OAKWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33019

Title: T () Change (X) Addition
Name: MORROW, ERNEST B
Address: 11030 S.W. 156 STREET
City-St-Zip: MIAMI, FL 33157

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

04/06/2007

Electronic Signature of Signing Officer or Director

Date