## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003464

Entity Name: FLORIDA DISTRICT EXPORT COUNCIL, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cilrrent Principal Place of Bliginess	NAW Principal Place of Kilsiness

6705 RED ROAD 200 LAS OLAS BLVD. SUITE 503 SUITE 1600

CORAL GABLES, FL 33143 US FT. LAUDERDALE, FL 33301 US

New Mailing Address: **Current Mailing Address:** 

6705 RED ROAD 2699 S. BAYSHORE DRIVE SUITE 300 SUITE 503 CORAL GABLES, FL 33143 US MIAMI, FL 33133 US

FEI Number: 51-0429534 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HENDRY, STONER, CALANDRINO & BROWN, P.A. 20 NORTH ORANGÉ AVENUE SUITE 600 ORLANDO, FL 32801 US

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:

**OFFICERS AND DIRECTORS:** 

Electronic Signature of Registered Agent Date

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete STD (X) Change ( ) Addition

MCNAMARA, RALPH ASBURY, NEAL Name: Name: 2699 SOUTH BAYSHORE DRIVE Address: 15712 SW 41 STREET Address:

City-St-Zip: MIAMI, FL 33133 City-St-Zip: FORT LAUDERDALE, FL 33331

(X) Change ( ) Addition Title: CCEO () Delete Title:

Name: LEIVA, GERMAN D Name: STARFIRE, CHARLOTTE Address: 6705 RED ROAD Address: 401 E JACKSONVILLE ST., 10TH FLOOR

City-St-Zip: TAMPA, FL 33602 US

CORAL GABLES, FL 33143 US City-St-Zip:

Title: WCD () Delete Title: (X) Change ( ) Addition NEAL, ASBURY Name: MACNAMARA, RAFAEL Name:

15712 SW 41 STREET 2699 S. BAYSHORE DRIVE, SUITE 300 Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33331 US City-St-Zip: MIAMI, FL 33133 US

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: TORRES, EDUARDO

200 LAS OLAS BLVD., SUITE 1600 Address: Address: City-St-Zip: City-St-Zip: FT. LAUDERDALE, FL 33301

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: RAFAEL MACNAMARA Т 04/29/2009