


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000005001	
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1. Entity Name
MIAMI DADE CHAMBER FOUNDATION, INC.

Principal Place of Business
11380 NW 27TH AVENUE
SUITE 1328
MIAMI, FL 33167

Mailing Address
11380 NW 27TH AVENUE
SUITE 1328
MIAMI, FL 33167



DO NOT WRITE IN THIS SPACE

05302007 No Chg-NP CR2E037 (4/06)

4. FEI Number 56-2282473	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLLOWAY, WILBERT T
17831 NW 28TH COURT
MIAMI, FL 33056

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

000000770426
07/25/07-80003-008 70.00

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLLOWAY, WILBERT T 17831 NW 28TH COURT MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, MERVIS 900 SW 100TH TERRACE PEMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, JOHNNIE 2171 NW 65TH STREET MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO DIGGS, WILLIAM 11380 NW 27TH AVENUE, SUITE 1328 MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Diggs
President & CEO

7-20-07 (305) 751-8648

Date

Daytime Phone #