

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004498

FILED
Mar 19, 2009
Secretary of State

Entity Name: SOUTH DADE PIONEERS HISTORICAL RESEARCH AND EDUCATION CENTER, INC.

Current Principal Place of Business:

10851 SW 222ND STREET
MIAMI, FL 33170

New Principal Place of Business:

Current Mailing Address:

10851 SW 222ND STREET
MIAMI, FL 33170

New Mailing Address:

10851 SW 222ND STREET
CUTLER BAY, FL 33170

FEI Number: 34-1998041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRISCOE, GLADYS L
10851 SW 222ND STREET
MIAMI, FL 33170 US

Name and Address of New Registered Agent:

WALKER, LYDIA E
10851 SW 222ND STREET
CUTLER BAY, FL 33170 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: LYDIA E. WALKER

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRISCOE, GLADYS L
Address: 21811 SW 118 COURT
City-St-Zip: GOULDS, FL 33170

Title: SD () Delete
Name: COHEN, EDWARD
Address: 19707 SW 118TH PLACE
City-St-Zip: MIAMI, FL 33177

Title: TD (X) Delete
Name: WALKER, LYDIA E
Address: 10851 SW 222ND STREET
City-St-Zip: GOULDS, FL 33170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALKER, LYDIA E
Address: 10851 SW 222ND STREET
City-St-Zip: CUTLER BAY, FL 33170

Title: ST (X) Change () Addition
Name: TAYLOR, TIEESHA
Address: 10851 SW 222ST
City-St-Zip: CUTLER BAY, FL 33170

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: LYDIA E. WALKER

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date