

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009454

FILED
Jan 29, 2008
Secretary of State

Entity Name: NORTH DADE UMPIRE ASSOCIATION INC

Current Principal Place of Business:

7489 W 32ND CT
HIALEAH, FL 330185287

New Principal Place of Business:

Current Mailing Address:

7489 W 32ND CT
HIALEAH, FL 330185287

New Mailing Address:

FEI Number: 01-0820771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUADRA, FRANCISCO J
7489 W 32ND CT
HIALEAH, FL 330185287 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: DP () Delete
Name: CUADRA, HELEN C
Address: 7489 W 32ND CT
City-St-Zip: HIALEAH, FL 330185287

Title: DVP () Delete
Name: CUADRA, FRANCISCO
Address: 460 E 65 ST
City-St-Zip: HIALEAH, FL 33013

Title: DTS () Delete
Name: CUADRA, FRANCISCO J
Address: 7489 W 32ND CT
City-St-Zip: HIALEAH, FL 330185287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: FRANCISCO J CUADRA

DTS

01/29/2008

Electronic Signature of Signing Officer or Director

Date