

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
STATE OF FLORIDA
DIVISION OF CORPORATIONS

1995
5-1-95

B-7929-0

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 9:16

DOCUMENT # N32749 (6)

1. Corporation Name

THE DADE COUNTY BAR ASSOCIATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

%CHARLES P. SACHER
2655 LEJEUNE ROAD, STE. 1101
CORAL GABLES FL 33134

%CHARLES P. SACHER
2655 LEJEUNE ROAD, STE. 1101
CORAL GABLES FL 33134

3. Date Incorporated or Qualified 06/12/1989
3a. Date of Last Report 05/12/1994

4. FEI Number 59-0711420
Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

5. Certificate of Status Desired \$8.75 Additional Fee Required

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

City & State

City & State

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RIDGELY, JOHNNIE M
123 NW 1 AVE #214
MIAMI FL 33128

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME GIEVERS, KAREN
STREET ADDRESS 44 W FLAGLER ST
CITY-ST-ZIP MIAMI FL

1.1 TITLE A
1.2 NAME F. ANTONES
1.3 STREET ADDRESS 66 W FLAGLER ST.
1.4 CITY-ST-ZIP MIA 33130

TITLE V
NAME RUSSOMANNO, HERMAN
STREET ADDRESS 175 NW 1 AVE
CITY-ST-ZIP MIAMI FL

2.1 TITLE VICE-PRES.
2.2 NAME BOUCHARD, R.
2.3 STREET ADDRESS 25 W FLAGLER ST.
2.4 CITY-ST-ZIP MIAMI 33128

TITLE S
NAME BOUCHARD, ROBERT
STREET ADDRESS 25 W FLAGLER ST
CITY-ST-ZIP MIAMI FL

3.1 TITLE D
3.2 NAME RIDGELY, J.
3.3 STREET ADDRESS 123 NW 1 AVE #214
3.4 CITY-ST-ZIP MIAMI 33128

TITLE D
NAME RIDGELY, JOHNNIE M
STREET ADDRESS 123 NW 1 AVE #214
CITY-ST-ZIP MIAMI FL

4.1 TITLE D BENEDICT P. KULANE
4.2 NAME 100 SE 2 St. #2100
4.3 STREET ADDRESS MIAMI 33131
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D DENNIS KAINEN
5.2 NAME 1401 BRICKELL AVE #800
5.3 STREET ADDRESS MIAMI 33131
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D JOSEPH SERRA
6.2 NAME 2665 So. Bayshore Dr.
6.3 STREET ADDRESS MIAMI 33133
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or on an attachment with an address.

SIGNATURE: J. Ridgely J. RIDGELY

4-19-95 305/371-2220