

**2000 UNIFORM BUSINESS REPORT (UBR)**

1/2

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

01-27-2000 90021 039 \*\*\*\*61.25

**DOCUMENT # N32749**

1. Entity Name

**THE DADE COUNTY BAR ASSOCIATION**

Principal Place of Business

123 N. W. FIRST AVE.  
 STE. 214  
 MIAMI FL 33128  
 US

Mailing Address

123 N.W. FIRST AVE  
 STE. 214  
 MIAMI FL 33128-1831  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-0711420**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	ROTHMAN, DAVID	200 S BISCAYNE BLVD. #3420	MIAMI FL 33131	<input checked="" type="checkbox"/>
D	RIDGLEY, J	123 NW 1ST AVE 214	MIAMI FL	<input type="checkbox"/>
D	KUEHNE, BENEDICT D	100 SE 2ND ST 2100	MIAMI FL	<input checked="" type="checkbox"/>
D	KAINEN, DENNIS	1401 BRICKELL AVE 800	MIAMI FL	<input type="checkbox"/>
D	SEROTA, JOSEPH	2885 S BAYSHORE DR	MIAMI FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President Elect	Gonzalez, Ervin A. D	100 So. Biscayne Blvd. #900	Miami, Florida 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice-President	William Aaron D	201 So. Biscayne Blvd. #880	Miami, -Florida 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Tom Pennekamp, Jr. D	2665 So. Bayshore Dr. PH One	Miami, Fla. 33133	<input type="checkbox"/>	<input checked="" type="checkbox"/>
President				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** *Dennis G. Kainen*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Dennis G. Kainen, President**

1-19-00 305/371-2220  
 Date Daytime Phone #