

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34704

FILED
Aug 31, 2008
Secretary of State

Entity Name: NATIONAL WOMEN'S POLITICAL CAUCUS OF MIAMI-DADE, COUNTY, INC.

Current Principal Place of Business:

3301 NE 5TH AVENUE
#1103
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

3301 NE 5TH AVE
1103
MIAMI, FL 33137 US

New Mailing Address:

3301 NE 5TH AVENUE
#1103
MIAMI, FL 33137 US

FEI Number: 59-2682157 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALEXANDRA, WAYLAND
3301 NE 5TH AVE.
1103
MIAMI, FL 33137 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: CD () Delete
Name: RAFERTY, KIT
Address: 150 SE 25TH RD APT 2J
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: WAYLAND, ALEXANDRA
Address: 3301 NE 5TH AVE
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: SHINABERRY, DIANA
Address: 9312 NORTH MIAMI AVENUE
City-St-Zip: MIAMI SHORES, FL 33150

Title: D () Delete
Name: VILLATORO, NATHALIE
Address: 2292 SW 58 AVENUE
City-St-Zip: MIAMI, FL 33155

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:

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: ALEXANDRA WAYLAND

D

08/31/2008

Electronic Signature of Signing Officer or Director

_____ Date