

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50007

FILED
Apr 28, 2004
Secretary of State**Entity Name:** DADE COMMUNITY FOUNDATION, INC.**Current Principal Place of Business:**200 S BISCAYNE BLVD
SUITE 505
MIAMI, FL 33131 US**New Principal Place of Business:****Current Mailing Address:**200 S BISCAYNE BLVD
SUITE 505
MIAMI, FL 33131 US**New Mailing Address:****FEI Number:** 65-0350357 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SHACK, RUTH
200 S BISCAYNE BLVD
SUITE 2780
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**SHACK, RUTH
200 S BISCAYNE BLVD
SUITE 505
MIAMI, FL 33131 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: RUTH SHACK

04/28/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: SHACK, RUTH
Address: 200 SOUTH BISCAYNE BLVD., STE 505
City-St-Zip: MIAMI, FL 33131**Title:** DC () Delete
Name: MORALES, JIMMY
Address: 200 SOUTH BISCAYNE BLVD., STE 505
City-St-Zip: MIAMI, FL 33131**Title:** DVC () Delete
Name: MILSTEIN, RICHARD
Address: 200 SOUTH BISCAYNE BLVD., STE 505
City-St-Zip: MIAMI, FL 33131**Title:** DS () Delete
Name: MARTINEZ, MARICARMEN
Address: 200 SOUTH BISCAYNE BLVD., STE 505
City-St-Zip: MIAMI, FL 33131**Title:** DT () Delete
Name: LAVINA, RICHARD
Address: 200 SOUTH BISCAYNE BLVD., STE 505
City-St-Zip: MIAMI, FL 33131**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:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RUTH SHACK

DP

04/28/2004

Electronic Signature of Signing Officer or Director

Date