2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001396

FILED Apr 22, 2009 Secretary of State

Entity Name: SOUTH DADE REDEVELOPMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business: 300 NW 12TH AVE. 9065 HAVEN AVENUE MIAMI, FL 33128 SUITE 100 RANCHO CUCAMONGA, CA 91730 US **Current Mailing Address:** New Mailing Address: 9065 HAVEN AVENUE 300 NW 12TH AVE. MIAMI, FL 33128 SUITE 100 RANCHO CUCAMONGA, CA 91730 US FEI Number: 65-0396666 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOMINGUEZ, ELENA DOMINGUEZ, ELENA 300 NW 12TH AVE 8540 SW 104 STREET MIAMI, FL 33128 MIAMI, FL 33156 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: 04/22/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DOMINGUEZ, ELENA DOMINGUEZ, ELENA Name: Name: 300 NW 12TH AVENUE Address: 8540 SW 104 ST. Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip: MIAMI, FL 33156 Title: Title: (X) Change () Addition () Delete SIBLEY, RUSSELL Name: Name: CLARK, REBECCA Address: 300 NW 12TH AVENUE Address: 9065 HAVEN AVENUE, SUITE 100 City-St-Zip: MIAMI, FL 33128 City-St-Zip: RANCHO CUCAMONGA, CA 91730 Title: () Delete Title: () Change (X) Addition THOMAS, TRACY Name: Name: 9065 HAVEN AVENUE, SUITE 100 Address: Address: City-St-Zip: City-St-Zip: RANCHO CUCAMONGA, CA 91730 US Title: () Delete Title: TD () Change (X) Addition Name: Name: WHITTINGHAM, RICHARD 9065 HAVEN AVENUE, SUITE 100 Address: Address: City-St-Zip: City-St-Zip: RANCHO CUCAMONGA, CA 91730 US Title: () Delete Title: () Change (X) Addition BRYAN, DORETTA Name: Name: 9065 HAVEN AVENUE, SUITE 100 Address: Address: RANCHO CUCAMONGA, CA 91730 US City-St-Zip: 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: ELENA DOMINGUEZ VD 04/22/2009