

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003025

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** REBUILDING TOGETHER MIAMI - DADE, INC.

**Current Principal Place of Business:**

1533 SUNSET DRIVE  
150  
MIAMI, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

1533 SUNSET DRIVE  
150  
MIAMI, FL 33143 US

**New Mailing Address:**

**FEI Number:** 65-0424304      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MILLER, WILLIAM R  
1533 SUNSET DRIVE  
150  
MIAMI, FL 33143 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: P  
Name: MILLER, WILLIAM R  
Address: 1533 SUNSET DRIVE STE 150  
City-St-Zip: MIAMI, FL 33143

Title: VP  
Name: TEASDALE, RON  
Address: 6620 SW 77 TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: TREA  
Name: BROWNING, TODD  
Address: 5200 GRANT STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: SEC  
Name: MARRACCINI, LINDA DR  
Address: 6280 SUNSET DR  
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D  
Name: MURPHY, MICHAEL P  
Address: COASTAL CONSTRUCTION 14141 69 AVENUE  
City-St-Zip: MIAMI, FL 33158

Title: ED  
Name: FALES, DONNA F  
Address: 6815 PALLAZZO STREET  
City-St-Zip: CORAL GABLES, FL 33146

I hereby 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 all other like empowered.

SIGNATURE: DONNA FALES

ED

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date