2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003367

FILED Jun 15, 2005 Secretary of State

Entity Name: MIAMI-DADE CHAPTER OF THE ASSOCIATION OF FUNDRAISING PROFESSIONALS, INC.

Current Principal Place of Business: New Principal Place of Business:

1598 NE 1ST AVE 4300 ALTON ROAD

MIAMI, FL 33132 US MIAMI BEACH, FL 33140 US

Current Mailing Address: New Mailing Address:

1598 NE 1ST AVE 4300 ALTON ROAD

MIAMI, FL 33132 US C/O DENA WILLMAN, FOUNDATION MIAMI BEACH, FL 33140 US

FEI Number: 65-0121702 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: Name and Address of New Registered Agent:

GUTIERREZ, GENE WILLMAN, DENA A 1598 NE 1ST AVE 4300 ALTON ROAD

MIAMI, FL 33132 US MIAMI BEACH, FL 33140 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: DENA A. WILLMAN 06/15/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PD () Delete Title: PD (X) Change () Addition

 Name:
 HERRMANN, JEFFRIE
 Name:
 WILLMAN, DENA A

 Address:
 15255 NW 82ND AVE
 Address:
 4300 ALTON ROAD

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: () Delete Title: (X) Change () Addition GUTIERREZ, GENE Name: RODRIGUEZ, LORENZO J Name: Address: 1598 NE 1ST AVE Address: 5807 PONCE DE LEON BLVD City-St-Zip: MIAMI, FL 33132 City-St-Zip: CORAL GABLES, FL 33146

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: SURMAN, TINÁ Name: GALYA, JOYCÉ

Address: UNIVERISTY OF MIAMI Address: 5915 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 331240320 City-St-Zip: CORAL GABLES, FL 33146

 $\label{eq:title:D} {\sf Title:} \qquad {\sf SD} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 WILLIAM, DENA
 Name:
 RODRIGUEZ, ROLANDO D

 Address:
 4300 ALTON ROAD
 Address:
 901 NW 17 STREET

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI, FL 33136

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: LORENZO J. RODRIGUEZ D 06/15/2005