2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003367

FILED Jan 17, 2008 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: 9401 BISCAYNE BOULEVARD MIAMI SHORES, FL 33138 **Current Mailing Address: New Mailing Address:** 9401 BISCAYNE BOULEVARD 9401 BISCAYNE BOULEVARD DEVELOPMENT OFFICE C/O L. J. RODRIGUEZ, DEVELOPMENT MIAMI SHORES, FL 33138 US MIAMI SHORES, FL 33138 FEI Number: 65-0121702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, LORENZO J RODRIGUEZ, LORENZO J 9401 BISCAYNED BOULEVARD 9401 BISCAYNE BOULEVARD MIAMI SHORES, FL 33138 MIAMI SHORES, FL 33138 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: LORENZO J. RODRIGUEZ 01/17/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CAPURSO, JOHN P Name: Name: 500 - 94TH STREET Address: Address: City-St-Zip: MIAMI BEACH, FL 33154 City-St-Zip: Title: Title: () Delete () Change () Addition RODRIGUEZ, LORENZO J Name: Name: Address: 9401 BISCAYNE BOULEVARD Address: City-St-Zip: MIAMI SHORES, FL 33138 City-St-Zip: Title: () Delete Title: () Change () Addition GALYA, JOYCE Name: Name: 5807 PONCE DE LEON BLVD Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: () Delete Title: Title: () Change () Addition RODRIGUEZ, ROLANDO D Name: Name: 901 NW 17 STREET Address: Address: City-St-Zip: MIAMI, FL 33136 City-St-Zip: Title: () Delete Title: () Change () Addition WILLMAN, DENA A Name: Name: 4300 ALTON ROAD Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 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: LORENZO J. RODRIGUEZ D 01/17/2008