

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006016

FILED
Jan 05, 2009
Secretary of State

Entity Name: DADE COUNTY MUNICIPAL CLERKS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O CITY CLERK'S OFFICE
790 N. HOMESTEAD BLVD
HOMESTEAD, FL 3303

New Principal Place of Business:

Current Mailing Address:

C/O CITY CLERK'S OFFICE
790 N. HOMESTEAD BLVD
HOMESTEAD, FL 3303

New Mailing Address:

FEI Number: 65-0635128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEDD, SHEILA P CMC
790 N HOMESTEAD BLVD
HOMESTEAD, FL 33030 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: PD () Delete
Name: SHEDD, SHEILA CMC
Address: 790 N. HOMESTEAD BLVD.
City-St-Zip: HOMESTEAD, FL 3303

Title: VP () Delete
Name: GRANADO, RAFAEL
Address: 501 PALM AVENUE
City-St-Zip: HIALEAH, FL 33011

Title: S () Delete
Name: EASTMAN, DEBRA
Address: 6853 MAIN STREET
City-St-Zip: MIAMI LAKES, FL 33014

Title: T () Delete
Name: GARCIA, CARMEN J CMC
Address: 500 SW 109 AVENUE
City-St-Zip: SWEETWATER, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GARCIA, CARMEN J CMC
Address: 500 SW 109 AVENUE
City-St-Zip: SWEETWATER, FL 33174

Title: S (X) Change () Addition
Name: BARBARA, HERRERA
Address: 8300 NW 53 STREET SUITE 100
City-St-Zip: DORAL, FL 33166

Title: T (X) Change () Addition
Name: MENENDEZ, MARIA M CMC
Address: 6130 SUNSET DRIVE
City-St-Zip: SOUTH MIAMI, FL 33143

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: CARMEN J. GARCIA

VP

01/05/2009

Electronic Signature of Signing Officer or Director

Date