FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL*REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

POCUMENT # N9600006509 (1)

DORSEY MIAMI NORTHWESTERN ALUMNI ASSOCIATION INC

•									118 Juli (118)	
Principal Place of Business Mailing Address								i v idit V V	140 1811 1001	
3883 NW 207TH ST RD 3883 NW 207TH ST RD MIAMI FL 33055)			3. Date Incorporated or Qualified				
						01/01/1997				
l						4. FEI Number		An	plied For	
						65 -0 70 7799	r		Applicable	
2. Principal Place of Business 2e. Mailing Address			·				\$8.75 Additional			
21		26	26.			5. Certificate of Status Desired		ee Rec		
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be				
22		27	27			Trust Fund Contribution Added to Fees				
City & S	ale	City & State	City & State			7. Is this nonprofit corporation a homeowners association?				
23		28				Yes				
Zip	Country	Zip	Coun	try		8. This corporation owes or has paid the cu			ngible	
24	25	29	30				Yes Yes		No	
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
			8	B1	Name					
MILLER, NATHANIEL G			8	32	Street Addre	treet Address (P.O. Box Number is Not Acceptable)				
3883 NW 207TH ST RD				Ш.						
MIAMI FL 33055				B3)						
				84	City		85	Zip C	ode	
	_		ļ -			FL	_ [
office o	nt to the provisions of Sections 617. Ir registered agent, or both, in the S I am familiar with, and accept the ob	tate of Florida. Such change wa	as authorized	by :	the corporatio	ration submits this statement for the purpose only is board of directors. I hereby accept the ap	of chang pointme	ging its ant as r	registered registered	
SIGNATURI	Nothwood 1x Jul	an								
12.	Signature, typied or printed name of registered	d agent and little if applicable (I	NOTE: Registered /	Agen	t signature required	ADDITIONS/CHANGES TO OFFICERS AN	חווור	ΑΈΔΕ Ζ	N 10	
	OFFICERS	AND DIFFECTORS	\rightarrow		(O)				Addition	
TITLE	Chair may of	the Board LI DELETE	1.1 TITL		-			withe	Augilion	
NAME	WATHANICL MILLE	e .	1.2 NAM			THANTEL G. MILIER	•			
STREET ADDRES	5 3986 NIN 207 4	t street	1.3 STR	EET A	1 -	883 N.W 207 St RA.				
CITY-ST-ZIP			1.4 CITY		- ZIP M				T	
TITLE			2.1 T/TL	E	105	Billie B. Williams	L Ch	han g e	☐ Addilion	
NAME	The state of the s		2.2 NAM	2.2 NAME		0 N.W. 85 54				
STREET ADORES			2.3 STR	3 STREET ADDRESS						
CITY-ST-ZIP	DPALOCKA, FIB.	rida 32 asy	2. 4 CITY	_		MAMI, Fla. 33150			7	
TITLE	Finner Riverton	DELETE	3.1 TITL	E	0''		L] Ch	nange	Addition	
NAME	Stille B. Wi Kinn		3.2 NAM	AE.	C1	anthough Morbby sa-				
STREET ADDRES	s	· <i>L</i>	3.3 STR	EET A	ADDRESS 7	z in N.W IBZ we CH				

14. CITY-S1-ZIP
15. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if or florida statutes, and that my name appears in

3.4. CITY- \$1-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 City-St-ZiP

4.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME

5.1 TITLE

52 NAME

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE: NOTHANTEL ALMINI

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

4-27-98

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302-625-559D

Change

Addition

FILED

Jun 04 1998 8:00am

Secretary of State

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