2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006563

FILED Apr 03, 2009 Secretary of State

Entity Name: MIAMI DADE COUNTY POLICE ATHLETIC LEAGUE, INC.

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

10680 N.W. 25 STREET 10680 N.W. 25 STREET MIAMI, FL 33172 DORAL, FL 33172

Current Mailing Address: New Mailing Address:

10680 N.W. 25 STREET 10680 N.W. 25 STREET MIAMI, FL 33172 DORAL, FL 33172

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

GREENWOOD, BLANCA GREENWOOD, BLANCA 10680 NW 25TH STREET 10680 NW 25TH STREET 3RD FLOOR 3RD FLOOR MIAMI, FL 33172 US DORAL, FL 33172 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: 04/03/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RIVERA, JOHN RIVERA, JOHN Name: Name:

10680 NW 25TH STREET Address: 10680 NW 25TH STREET Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: DORAL, FL 33172

Title: () Delete Title: (X) Change () Addition DE LOS SANTOS, LUIS Name: DE LOS SANTOS, LUIS Name:

Address: 10680 NW 25TH STREET Address: 10680 NW 25TH STREET City-St-Zip: MIAMI, FL 33172 City-St-Zip: DORAL, FL 33172

Title: () Delete Title: (X) Change () Addition STAHL, STEADMAN Name: STAHL, STEADMAN Name:

10680 NW 25TH STRET 10680 NW 25TH STRET Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: DORAL, FL 33172

(X) Change () Addition Title: () Delete Title: LIMA, PABLO Name: Name: LIMA, PABLO

10680 NW 25TH STREET 10680 NW 25TH STREET Address: Address:

City-St-Zip: MIAMI, FL 33172 City-St-Zip: DORAL, FL 33172

Title: () Delete (X) Change () Addition LOPEZ, ADOLFO LOPEZ, ADOLFO Name: Name: 10680 NW 25 STREET 10680 NW 25 STREET Address: Address: MIAMI, FL 33172 US City-St-Zip: City-St-Zip: DORAL, FL 33172 US

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.

Title:

SIGNATURE: JOHN RIVERA PD 04/03/2009