

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007346

FILED
Mar 28, 2008
Secretary of State

Entity Name: UNITED CORRECTIONAL OFFICERS FEDERATION, INC.

Current Principal Place of Business:

12952 SW 133 CT.
MIAMI, FL 33186

New Principal Place of Business:

12952 SW 133 CT.
SUITE B
MIAMI, FL 33186

Current Mailing Address:

15731 SW 59 TERRACE
MIAMI, FL 33193

New Mailing Address:

FEI Number: 65-0812925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIEVES, EDGAR
12952 SW 133 CT. # B
MIAMI, FL 33186 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: D () Delete
Name: RUANO, ROGER
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

Title: STD () Delete
Name: NIEVES, MARGARITA
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

Title: TR () Delete
Name: FERNANDEZ, LEONARDO
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

Title: TR () Delete
Name: BROWN, ROBERT
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

Title: TR () Delete
Name: CUNNINGHAM, JAMES
Address: 12952 S.W 133 CT #B
City-St-Zip: MIAMI, FL 33186 US

Title: PD () Delete
Name: NIEVES, EDGAR
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: DE PAZOS, MARGARITA
Address: 12952 SW 133 CT. # B
City-St-Zip: MIAMI, FL 33186 US

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

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

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

Title: () Change () Addition
Name:
Address:
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: EDGAR NIEVES

PD

03/28/2008

Electronic Signature of Signing Officer or Director

Date