2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# P08000068542

Entity Name: NORTHWEST DADE COMMUNITY SOLUTIONS, INC.

Current Principal Place of Business:

3908 NW 167TH STREET
MIAMI GARDENS, FL 33054

New Principal Place of Business:

Current Mailing Address:

2050 NW 115TH STREET
MIAMI, FL 33169

New Mailing Address:

FEI Number: 90-0401484 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTER, JAMES S III
3361 NW 214TH STREET
MIAMI GARDENS, FL 33056 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PHILLIPS, SAMUEL K SR
Address: 2050 NW 115TH STREET
City-St-Zip: MIAMI, FL 33167

Title: VP ( ) Delete
Name: WILLIAMS, EDDIE
Address: 18808 NW 52ND CT
City-St-Zip: MIAMI, FL 33055

Title: T ( ) Delete
Name: HICKMAN, DEWAYNE
Address: 20104 NW 27TH CIRCLE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: S ( ) Delete
Name: CARTER, JAMES S III
Address: 3361 NW 214TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: HICKMAN, DWAYNE
Address: 20104 NW 27TH CIRCLE
City-St-Zip: MIAMI GARDENS, FL 33056

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL K. PHILLIPS, SR. P 01/22/2009

Electronic Signature of Signing Officer or Director Date