

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738919

**Entity Name:** UNITARIAN UNIVERSALIST CONGREGATION OF MIAMI, INC.

**FILED**  
**Feb 06, 2019**  
**Secretary of State**  
**7156239911CC**

**Current Principal Place of Business:**

7701 S.W. 76 AVENUE  
MIAMI, FL 33143

**Current Mailing Address:**

7701 S.W. 76 AVENUE  
MIAMI, FL 33143

**FEI Number: 59-0774186**

**Certificate of Status Desired: No**

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

UNITARIAN UNIVERSALIST CONGREGATION OF MIAMI  
7701 SW 76TH AVE  
MIAMI, FL 33143 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: DESIREE DESTEFANO**

**02/06/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, BOARD OF TRUSTEES  
MEMBER  
Name            DE STEFANO, DESIREE  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

Title            SECRETARY, BOARD OF TRUSTEES  
MEMBER  
Name            MAXWELL, KRISTIN  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

Title            VP, BOARD OF TRUSTEES MEMBER  
Name            JOSEPH, SELVA  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

Title            TREASURER, BOARD OF TRUSTEES  
MEMBER  
Name            MCARTHUR, JANICE  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

Title            BOARD OF TRUSTEES MEMBER  
Name            PONTIER, CHRISTINE HUGHES  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

Title            BOARD OF TRUSTEES MEMBER  
Name            HAYES, ELIZABETH  
Address        7701 S.W. 76 AVENUE  
City-State-Zip: MIAMI FL 33143

*I hereby 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 all other like empowered.*

**SIGNATURE: DESIREE DESTEFANO**

**PRESIDENT**

**02/06/2019**

Electronic Signature of Signing Officer/Director Detail

Date