

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N00000005218

Entity Name: CITY OF MIAMI RETIRED POLICE OFFICERS COMMUNITY BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

480 N.W. 11TH STREET
MIAMI, FL 33136

Current Mailing Address:

P. O. BOX 011874
MIAMI, FL 33101-1874 US

FEI Number: 65-1033308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARSHALL, JAMES H. JR.
480 NW 11 STREET
MIAMI, FL 33136 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: JAMES H. MARSHALL, JR.

11/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MARSHALL, JAMES H. JR.
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

Title VP
Name STEWART, EROL A.
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

Title T
Name NAJIY, ANITA
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

Title S
Name JACKSON, JR., WILLIE R.
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

Title SERGEANT -AT-ARMS
Name PAYNE, DEBORAH
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

Title PARLIAMENTARIAN
Name SANON, DANIEL
Address P. O. BOX 011874
City-State-Zip: MIAMI FL 33101-1874

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: JAMES H. MARSHALL, JR.

PRESIDENT

11/05/2019

Electronic Signature of Signing Officer/Director Detail

Date