

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005770

FILED
Jan 22, 2015
Secretary of State
CC8228908125

Entity Name: SOUTH FLORIDA DENTAL HYGIENE ASSOCIATION, INC.

Current Principal Place of Business:

11212 SW 33 CIRCLE PLACE
MIAMI , FL 33165

Current Mailing Address:

11212 SW 33 CIRCLE PLACE
MIAMI, FL 33165 US

FEI Number: 36-4555153

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, ELSY D
11212 SW 33 CIRCLE PLACE
MIAMI, FL 33165 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: ELSY D. DIAZ

01/22/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MULETT, ANA
Address 16508 SW 71 ST TERRACE
City-State-Zip: MIAMI FL 33193

Title PRESIDENT ELECT
Name LEIBA, ALWYN
Address 12011 NW 13 ST.
City-State-Zip: PEMBROKE PINES FL 33026

Title VP
Name WINSTON, RON
Address 5908 SIENA LANE
City-State-Zip: HOLLYWOOD FL 33021

Title TRUSTEE
Name SMITH, REBECCA
Address 14483 SW 137TH PLACE
City-State-Zip: MIAMI FL 33186

Title SECRETARY
Name DE LA TORRE, YALI
Address 3917 WEST FLAGLER STREET, #D-8
City-State-Zip: CORAL GABLES FL 33015

Title TREASURER
Name DIAZ, ELSY D
Address 11212 SW 33 CIRCLE PLACE
City-State-Zip: MIAMI FL 33165

Title IMMEDIATE PAST PRESIDENT
Name LARIOS, MARIA
Address 445 NW 4 STREET, #202
City-State-Zip: MIAMI FL 33128

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: ELSY D. DIAZ

TREASURER

01/22/2015

Electronic Signature of Signing Officer/Director Detail

Date