

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005770

Entity Name: SOUTH FLORIDA DENTAL HYGIENISTS' ASSOCIATION, INC.

FILED
Apr 27, 2019
Secretary of State
7075743027CC

Current Principal Place of Business:

22 WEST RIVO ALTO DR.
MIAMI BEACH, FL 33139

Current Mailing Address:

22 WEST RIVO ALTO DR
MIAMI BEACH , FL 33139 US

FEI Number: 36-4555153

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMAZON, BARBARA L
22 WEST RIVO ALTO DR
MIAMI BEACH, FL 33139 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: BARBARA AMAZON

04/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title TREASURER
Name AMAZON, BARBARA
Address 22 WEST RIVO ALTO DR
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT
Name GORMAN, SUSAN
Address 8145 XENIA LN
City-State-Zip: NAPLES FL 33114

Title VP
Name PINO, ILEANA
Address 3221 NE 23 AVE
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title VP
Name IVANOFF, ANN MARIE
Address 4801 JACKSON STREET
City-State-Zip: HOLLYWOOD FL 33021

Title SECRETARY
Name DE LA TORRE , YALI
Address 3917 WEST FLAGLER
APT D8
City-State-Zip: CORAL GABLES FL 33134

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: BARBARA AMAZON

TREASURER

04/27/2019

Electronic Signature of Signing Officer/Director Detail

Date