

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008109

**Entity Name:** MIAMI DADE ELECTION REFORM COALITION, INC.

**Current Principal Place of Business:**

11430 SW 62 AVE  
MIAMI, FL 33156

**Current Mailing Address:**

11430 SW 62 AVE  
MIAMI, FL 33156 US

**FEI Number:** 72-1606856

**Certificate of Status Desired:** No

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

GILLETTE, MARTA  
21346 SW 89TH PLACE  
MIAMI, FL 33189 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CO-C  
Name WIPIOR, KRISTIN  
Address 11430 SW 62 AVE  
City-State-Zip: MIAMI FL 33156

Title CO-C  
Name BARTHELEMY, ANTHONY  
Address 3720 MARIGNY STREET  
City-State-Zip: NEWB ORLEANS LA 70122

Title TD  
Name SCHWARTZ, BARBARA  
Address 7920 SW 138TH COURT  
City-State-Zip: MIAMI FL 33183

Title PD  
Name WAYLAND, ALEXANDRA  
Address 3301 NE 5TH AVE., #1103  
City-State-Zip: MIAMI FL 33137

Title VD  
Name GILLETTE, MARTA III  
Address 21346 SW 89TH PLACE  
City-State-Zip: MIAMI FL 33189

*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:** KRISTIN WIPIOR

**CO-CHAIR**

**04/25/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date