

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005505

Entity Name: MIAMI-DADE COUNTY FAIR FOUNDATION, INC.**Current Principal Place of Business:**10901 CORAL WAY
MIAMI, FL 33165**Current Mailing Address:**10901 CORAL WAY
MIAMI, FL 33165**FEI Number:** 02-0786628**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HOHENSTEIN, ROBERT P
10901 CORAL WAY
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:** ROBERT HOHENSTEIN

01/29/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name HOHENSTEIN, ROBERT P
Address 10901 CORAL WAY
City-State-Zip: MIAMI FL 33165

Title DIRECTOR
Name CARPENTER, WILLIE L
Address 10965 SW 175 STREET
City-State-Zip: MIAMI FL 33157

Title IMMEDIATE PAST CHAIRMAN
Name RODRIGUEZ, MANUEL J
Address 5955 S.W. 88TH CT.
City-State-Zip: MIAMI FL 33173

Title CHAIRMAN ELECT
Name CUEVAS, ROGER
Address 12353 S.W. 104 LANE
City-State-Zip: MIAMI FL 33186

Title CHAIRMAN
Name CORA, EDUARDO F
Address 8961 S.W. 57TH TERRACE
City-State-Zip: MIAMI FL 33173

Title TREASURER
Name BELLIDO, NELSON C
Address 6265 S.W. 31ST ST.
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name ALEXANDER, IVONNE F.
Address 12811 S.W. 148 STREET ROAD
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name DOTSON, ALBERT
Address 17901 S.W. 78 AVE.
City-State-Zip: PALMETTO BAY FL 33157

Continues on page 2

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: ROBERT HOHENSTEIN

PRESIDENT / CEO

01/29/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GONZALEX, ROBIUO, GEORGINA
Address 1715 S.W. 85 AVE.
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name KRINZMAN, RICHARD
Address 2645 S. BAYSHORE DR.
APT. 1101
City-State-Zip: MIAMI FL 33133

Title SECRETARY
Name MORRIS, MARGUERITE
Address 4717 N.W. 7 STREET
APT 205
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name HEVIA, ROBERT
Address 6501 MARLIN DRIVE
City-State-Zip: CORAL GABLES FL 33158

Title DIRECTOR
Name ROJAS, MARIA T
Address 612 VALVERDE AVE.
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name GRIFFITH, JACK
Address 9490 S.W. 117 TERRACE
City-State-Zip: MIAMI FL 33176

Title DIRECTOR
Name LORIA, DOUGLAS S.
Address 6261 SUNSET DRIVE
APT. G-6
City-State-Zip: SOUTH MIAMI FL 33143

Title DIRECTOR
Name GARCIA-TOLEDO, RAFAEL
Address 10901 CORAL WAY
City-State-Zip: MIAMI FL 33165

Title DIRECTOR
Name MARTINEZ, ALEXIS
Address 10515 SW 124 ROAD
City-State-Zip: MIAMI FL 33186