

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004877

**FILED**  
**Apr 17, 2014**  
**Secretary of State**  
**CC7343545173**

**Entity Name:** MIAMI DADE BAIL ASSOCIATION, INC.

**Current Principal Place of Business:**

1000 NW 14TH STREET  
MIAMI, FL 33136

**Current Mailing Address:**

1000 NW 14TH STREET  
MIAMI, FL 33136

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HEFFERNAN, MARK  
1000 NW 14TH 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	S	Title	VP
Name	HEFFERNAN, MARK	Name	BRENNAN, JOE
Address	1000 NW 14TH STREET	Address	1000 NW 14TH STREET
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136

*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:** MARK HEFFERNAN

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04/17/2014

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

\_\_\_\_\_  
Date