

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005016

Entity Name: MIRACLE LEAGUE OF MIAMI-DADE INC.**Current Principal Place of Business:**8300 S.W. 164TH TERRACE
PALMETTO BAY, FL 33157**Current Mailing Address:**P.O. BOX 562646
MIAMI, FL 33256**FEI Number:** 27-2930117**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STURGE, KARL
8300 S.W. 164TH TERRACE
PALMETTO BAY, FL 33157 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:** KARL STURGE

02/21/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CO-CHAIRMAN
Name STURGE, KARL
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

Title TREASURER
Name ROCHA, LYNN
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

Title SECRETARY
Name KACER, KEVIN
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

Title CO-CHAIRMAN
Name ROCHA, RAIMUNDO
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

Title DIRECTOR OF FUNDRAISING
Name ROBINSON, SANDY
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

Title DIRECTOR OF BASEBALL
OPERATIONS
Name FAIRMAN, KEN
Address P.O. BOX 562646
City-State-Zip: MIAMI FL 33256

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: LYNN P. ROCHA**TREASURER**

02/21/2025

Electronic Signature of Signing Officer/Director Detail

Date