NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 709804

GERMAN-AMERICAN SOCIAL CLUB OF GREATER MIAMI, IN

Principal Place of Business

11919 S.W. 56TH ST. MIAMI FL 33165

Mailing Address

11919 S.W. 56TH ST. MIAMI FL 33165

FILED Feb 27, 1999 8:00 am § Secretary of State

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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed 10/22/1965				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number Applied For				
22	27	59-6134720 Not Applicable				
City & State	City & State	5. Certificate of Status Desired \$8.75 Additional				

23			28			ree required						
	Zip	Country	Zip	Country		2 Library Carry Ca						
24		25	29	30		Trust Fund Contribution Added to Fees						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
					81	81 Name						
	Joks, Det H. 10689 N. Kendall Drive				82	2 Street Address (P.O. Box Number is Not Acceptable)						
	SUITE 221				83	83						
	MIAMI FL FL 33	3176			84	84 City S Zip Code						

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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SIGNATURE	Hunnelore Crothers	NOTE: Registered Agent signature r	required when reinstating)		DATE		
	digitation, typed of printed flexible agents agents.		ADDITIONS/CH	ANGES TO C		ND DIRECTOR	3S IN 12
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CI	ANGES TO C	ZI TOLKO ZI		
TITLE	PD DELETE	1,1 TITLE				Change	☐ Addition
NAME	CROTHERS, HANNELORE	1.2 NAME					,
STREET ADDRESS	9570 CARIBBEAN BLVD	1.3 STREET ADDRESS					.]
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP					53.4.1 25
TITLE	VD DELETI	2.1 TITLE				Change	Addition
NAME	GRIEGER, HERMAN	2.2 NAME			ě		
STREET ADDRESS	10441 SW 45TH ST	2.3 STREET ADDRESS			•		
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP				-	
TITLE	S DELETI	3.1 TITLE	5	1-1-	- 2	· [] Change	Addition
NAME	GODDARD, BERENICE A	3.2 NAME	MARGARET 10300 S.W.	HUTTI	=K_TRO	DEMI	N.9
STREET ADDRESS	15497 SW 288TH ST #A-204	3.3 STREET ADDRESS	10300 S.W.	38111	TERR	AO/=	
CITY-ST-ZIP	HOMESTEAD FL	3.4. CITY-ST-ZIP	MIAM!	PI,	. 2 2 / (- A 4 PR
TITLE	T DELETI	4.1 TITLE				Change	Addition
NAME	MORARIN, MARIA	4. 2 NAME					
STREET ADDRESS	11420 SW 83RD TERR	4.3 STREET ADDRESS		•			
CITY-ST-ZIP	MIAM! FL	4.4 CITY-ST-ZIP					
TITLE	VD DELETI	5.1 TITLE		•	•	Change	☐ Addition
NAME	HENTSCHEL, FRITZ	5.2 NAME	1		•		
STREET ADDRESS	12511 SW 112 TERR	5.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP			·		Addition
TITLE	☐ DELETI					☐ Change	MODICION
NAME		6.2 NAME			ň		
STREET ADDRESS		6.3 STREET ADDRESS					.
CITY OT ZID		6.4 CITY-ST-ZIP		•			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Fee Required