2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# 728899

Entity Name: THE MIAMI WOMAN'S CLUB

Current Principal Place of Business:

1737 NORTH BAYSHORE DRIVE
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1737 NORTH BAYSHORE DRIVE
MIAMI, FL 33132

New Mailing Address:

FEI Number: 59-0360320 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JUDY CLARK
5930 N BAYSHORE DR
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

JANE CAPORELLI
3301 NE 5TH AVE.
APT. 801
MIAMI, FL 33137 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: JANE CAPORELLI 04/24/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SVP ( ) Delete
Name: CULLEN, DONNA M
Address: 9133 COLLINS AV
City-St-Zip: MIAMI BEACH, FL 33154

Title: FSD ( ) Delete
Name: HARRIMAN, MARY
Address: 4201 ROYAL PALM
City-St-Zip: MIAMI BEACH, FL 33140

Title: RSD ( ) Delete
Name: STEWART, ANNE
Address: 15030 SW 153 ST
City-St-Zip: MIAMI, FL 33187

Title: PO ( ) Delete
Name: TIMONEY, NOREEN
Address: 1717 N. BAYSHORE DR.
City-St-Zip: MIAMI, FL 33132

Title: TVP ( ) Delete
Name: KASSNER, KATHRYN
Address: 5905 N BAY RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD ( ) Delete
Name: JUDY CLARK,
Address: 5930 N BAYSHORE DR
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: 1VP (X) Change ( ) Addition
Name: KASSNER, KATHRYN
Address: 5905 N BAY RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: DF (X) Change ( ) Addition
Name: CAPORELLI, JANE
Address: 3301 NE 5TH AVE., 801
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANE CAPORELLI DF 04/24/2007
Electronic Signature of Signing Officer or Director Date