## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 08, 2008 Secretary of State **DOCUMENT#750600** 

Entity Name: FRIENDS OF THE BASS MUSEUM, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2121 PARK AVENUE MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

2121 PARK AVENUE MIAMI BEACH, FL 33139

FEI Number: 59-2017511 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FARMER, GARY ED CUBINA, SILVIA K ED 2121 PARK AVENUE 2121 PARK AVENUE MIAMI BCH, FL 33139 US MIAMI BCH, FL 33139 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: SILVIA KARMEN CUBINA 10/08/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

KAISER, JOYCE Name: Name: 2 GROVE ISLE #1809 Address: Address:

City-St-Zip: COCONUT GROVE, FL 33133 US City-St-Zip:

Title: TRE () Delete Title: (X) Change ( ) Addition MILLER, LEONARD Name: RANDOLPH, ALAN G Name:

Address: 23 INDIAN CREEK ISLE Address: 121 ALHAMBRA PLAZA PH2 City-St-Zip: INDIAN CREEK VILLAGE, FL 33154 US City-St-Zip: CORAL GABLES, FL 33134 US

Title: SEC () Delete Title: VD. (X) Change ( ) Addition HECHT, FLORENCE HECHT, FLORENCE Name: Name:

3 GROVE ISLE #1401 Address: 3 GROVE ISLE #1401 Address:

City-St-Zip: COCONUT GROVE, FL 33133 US City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition RODRIGUEZ-TASEFF, LIDA Name: HECHT, FLORENCE Name:

200 S BISCAYNE BLVD SUITE 3400 Address: THREE GROVE ISLE #1401 Address:

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: MIAMI, FL 33131

Title: () Delete Title: ( ) Change (X) Addition LINDEMANN, GEORGE L Name: Name: 4500 BISCAYNE BLVD Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

MIAMI, FL 33137

SIGNATURE: SILVIA KARMEN CUBINA ED 10/08/2008

Electronic Signature of Signing Officer or Director

Date