

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752873

FILED
Jun 04, 2010
Secretary of State

Entity Name: MIAMI ART MUSEUM OF DADE COUNTY ASSOCIATION, INC.

Current Principal Place of Business:

101 W FLAGLER ST
MIAMI, FL 331301504

New Principal Place of Business:

Current Mailing Address:

101 W FLAGLER ST
MIAMI, FL 331301504

New Mailing Address:

FEI Number: 59-2048869 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
SUITE 1600
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: P
Name: MEYERS, GAIL S
Address: 3515 BAYSHORE VILLAS DRIVE
City-St-Zip: COCONUT, FL 33133

Title: C
Name: PODHURST, AARON
Address: 10 EDGEWATER DRIVE
City-St-Zip: CORAL GABLES, FL 33133

Title: VP
Name: MEYERHOFF GREENE, ROSE ELLEN
Address: 201 SOLANO PRADO
City-St-Zip: CORAL GABLES, FL 33156

Title: S
Name: VENTO, THERESE
Address: 3908 MAIN HWY
City-St-Zip: COCONUT GROVE, FL 33133

Title: T
Name: KRINSKY, JEFFEREY
Address: 333 SOUTH MIAMI AVE, SUITE 150
City-St-Zip: MIAMI, FL 33130

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: AARON PDHURST

C

06/04/2010

Electronic Signature of Signing Officer or Director

_____ Date