2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003511

FILED Apr 10, 2009 Secretary of State

Entity Name: EVCLAY/PRSA MIAMI CHAPTER ENDOWMENT FUND, INC.

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

6701 S W 94TH STREET PINECREST, FL 33156

Current Mailing Address: New Mailing Address:

6701 S W 94TH STREET PINECREST, FL 33156

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

ROSS, ROBERT C 6701 S W 94TH STREET PINECREST, FL 33156 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:

Floring Company of Devictors of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 MCKEY, RANDALL R
 Name:
 RODRIQUEZ, ELOISE E

 Address:
 5100 RAUNSON DR
 Address:
 1200 ANASTASIA AVE., SUITE 210

 City-St-Zip:
 MIAMI, FL 33146
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: VD () Delete Title: VD (X) Change () Addition Name: RODRIGUEZ, ELOISE Name: CANTON, SPERO

Address: 1200 AWPSTASIN, STE. 210 Address: 2501 SW 145TH AVE., SUITE 200

City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIRAMAR, FL 33027

 Title:
 SD () Delete
 Title:
 SD (X) Change () Addition

 Name:
 ANNABEZ, BEYRA
 Name:
 BEYRA, ANNABEL

 Address:
 10445 SW 133 ST
 Address:
 10445 SW 133 CT

City-St-Zip: MIAMI, FL 33186

City-St-Zip: MIAMI, FL 33186

Title: TD () Delete Title: TD (X) Change () Addition Name: CURELLI, MARIE Name: JARQUIN, DARLING

Address: 1701 NE 127TH ST Address: 444 SW 2ND AVE., 10TH FLOOR

City-St-Zip: MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33130

 Name:
 ROSS, ROBERT C
 Name:
 ROSS, ROBERT C

 Address:
 6701 SW 94 ST
 6701 SW 94 ST

 City-St-Zip:
 MIAMI, FL 33156
 City-St-Zip:
 PINECREST, FL 33156

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.

SIGNATURE: ELOISE E. RODRIGUEZ PRES 04/10/2009