## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000007959

FILED Feb 16, 2010 Secretary of State

Entity Name: THE CORAL GABLES MUSEUM, CORP.

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

285 ARAGON AVE CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

POB 141687 MIAMI, FL 33114

FEI Number: 27-0077412 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:

GUILFORD, F.W.ZEKE GUILFORD ASSOCIATES, PA 2222 PONCE DE LEON BLVD CORAL GABLES, FL 33134 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: F

Name: KAKOURIS, GEORGE
Address: 1325 CAMPO SANO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: D

Name: GUILFORD, ZEKE Address: 926 CASTILE AVE

City-St-Zip: CORAL GABLES, FL 33134

Title:

Name: RUTHERFORD, SHELLEY
Address: 5200 SNAPPER CREEK
City-St-Zip: CORAL GABLES, FL 33156

Title: [

Name: HERNANDEZ, EDUARDO
Address: 1110 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33134

Title:

Name: SLESNICK, JEANNETT

Address: 827 NORTH GREENWAY DRIVE City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: PARKS, ARVA M Address: 1601 S MIAMI AVE City-St-Zip: MIAMI, FL 33129

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: GEORGE KAKOURIS CHMN 02/16/2010