

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03485

FILED
Apr 30, 2009
Secretary of State

Entity Name: MIAMI BACH SOCIETY, INC.

Current Principal Place of Business:

2912 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

P O BOX 4034
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 59-2429406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERKE, MICHAEL A MR.
AKERMANN, SENTERFITT, 1 SOUTHEAST 3RD AVE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: FALES, GORDON
Address: 6815 PALLAZZO STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: SD () Delete
Name: VEATER, CLAIRE W
Address: 10453 SW 114 STREET
City-St-Zip: MIAMI, FL 33176

Title: DT () Delete
Name: BEWLEY, KINGSLEY
Address: 566 STONEMONT DRIVE
City-St-Zip: WESTON, FL 33326

Title: VP () Delete
Name: ABBOTT, THOMAS
Address: 6871 SW 128TH STREET
City-St-Zip: MIAMI, FL 33156 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDING, VOLKER
Address: 600 BILTMORE WAY, APT. 307
City-St-Zip: CORAL GABLES, FL 33134

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: D () Change (X) Addition
Name: KATHRYN, GAUBATZ
Address: 2912 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134 US

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: KATHRYN GAUBATZ

D

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date