

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003664

FILED
Feb 23, 2011
Secretary of State

Entity Name: FLORIDA IMMIGRANT ADVOCACY CENTER, INC.

Current Principal Place of Business:

3000 BISCAYNE BLVD
#400
MIAMI, FL 331374129 US

New Principal Place of Business:

Current Mailing Address:

3000 BISCAYNE BLVD
#400
MIAMI, FL 331374129 US

New Mailing Address:

FEI Number: 65-0610872 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WRIGHT, GAIL E
3000 BISCAYNE BLVD.
SUITE 400
MIAMI, FL 331374129 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
Name: GOLDFARB, CARL
Address: 401 EAST LAS OLAS BLVD. #1200
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: SD
Name: HERRON, JANE
Address: 5342 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109 US

Title: TD
Name: AUDAIN ALLEN, NANCY
Address: 13155 SW 134 STREET #205
City-St-Zip: MIAMI, FL 33186 US

Title: VD
Name: SKOLNICK, HOLLY
Address: 333 AVENUE OF THE AMERICAS #4400
City-St-Zip: MIAMI, FL 33131 US

Title: ED
Name: LITTLE, CHERYL
Address: 3000 BISCAYNE BLVD. #400
City-St-Zip: MIAMI, FL 33137 US

Title: DFA
Name: WRIGHT, GAIL E
Address: 3000 BISCAYNE BLVD. #400
City-St-Zip: MIAMI, FL 33137 US

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: GAIL E. WRIGHT

DFA

02/23/2011

Electronic Signature of Signing Officer or Director

Date