2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 101652

Entity Name: CORPORATION COMPANY OF MIAMI

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
201 S. BISC 1600 MIAMI MIAMI, FL						
Current Mailing Address:			New Mailin	New Mailing Address:		
201 S. BISC 1600 MIAMI MIAMI, FL						
FEI Number:	20-2713868	FEI Number Applied For ()	FEI Number Not Applic	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent				Address of New Registered Agent:		
BOLTON, J 201 S. BISC 1500 MIAMI MIAMI, FL	CAYNE BLVD. I CENTER					
The above in the State		ubmits this statement for the pur	pose of changing its	s registered office or registered agent, or both,		
SIGNATUR						
	Electronic	c Signature of Registered Agent		Date		
Election Cam		(2)(b), F.S., the corporation did not re Trust Fund Contribution(). ORS:	•	s. S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SALAS, RAUL	Delete CAYNE BLVD., STE. 1500 1	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	MURPHY, TIMOT	E BLVD., STE. 1500	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	WILLARD, JAME	E BLVD., STE. 1500	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () I HUMPHRIES, J. 201 S. BISCAYN MIAMI, FL 3313	GREGORY E BLVD., STE. 1500	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	FARRELL, JAME	E BLVD., STE. 1500	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MENOR, ARTHU	E BLVD., STE. 1500	Title: Name: Address: City-St-Zip:	VPTD (X) Change () Addition MENOR, ARTHUR 201 S. BISCAYNE BLVD., STE. 1500 MIAMI, FL 33131		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY J. MURPHY VP 05/01/2009