

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759824

**Entity Name:** BANKRUPTCY BAR ASSOCIATION OF THE SOUTHERN DISTRICT OF FLORIDA, INC.

**FILED**  
**Jan 17, 2024**  
**Secretary of State**  
**9437769667CC**

**Current Principal Place of Business:**

770 NE 82ND TER  
MIAMI, FL 33138

**Current Mailing Address:**

770 NE 82ND TER  
MIAMI, FL 33138 US

**FEI Number: 59-2119401**

**Certificate of Status Desired: No**

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

KHAN, ALEESHA  
770 NE 82ND TER  
MIAMI, FL 33138 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: ALEESHA KHAN**

**01/17/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SARDI, CARLOS  
Address        225 ALCAZAR AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title            PRESIDENT ELECT  
Name            LESSNE, MICHAEL  
Address        100 S.E. THIRD AVE.  
                  10TH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33394

Title            SECOND VICE PRESIDENT  
Name            CAPUANO, SAMUEL  
Address        1450 BRICKELL AVENUE  
                  SUITE 1900  
City-State-Zip: MIAMI FL 33131

Title            FIRST VICE PRESIDENT  
Name            ROSENBERG, ALAN  
Address        101 NE THIRD AVENUE  
                  SUITE 1210  
City-State-Zip: FORT LAUDERDALE FL 33301

Title            SECRETARY  
Name            MURPHY, MEAGHAN  
Address        3200 SOUTHEAST FINANCIAL  
                  CENTER  
                  200 S BISCAYNE BLVD  
City-State-Zip: MIAMI FL 33131

Title            TREASURER  
Name            ZEICHMAN, THOMAS  
Address        2385 NW EXECUTIVE CENTER DRIVE  
                  SUITE 250  
City-State-Zip: BOCA RATON FL 33431

*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: CARLOS SARDI**

**PRESIDENT**

**01/17/2024**

Electronic Signature of Signing Officer/Director Detail

Date