

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003080

**FILED**  
**Feb 12, 2013**  
**Secretary of State**  
**CC5917481376****Entity Name:** MIAMI BEACH SENIOR HIGH SCHOOL ALUMNI ASSOCIATION, INC.**Current Principal Place of Business:**C/O GWEN ZALDIVAR  
2231 PRAIRIE AVENUE  
MIAMI BEACH, FL 33139**Current Mailing Address:**C/O ROSALIND MERRITT  
1070 NE 202 TERRACE  
MIAMI, FL 33179 US**FEI Number:** 65-1113023**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RYNOR, JEFFREY ESQ.  
301 ARTHUR GODFREY ROAD  
PENTHOUSE  
MIAMI BEACH, FL 33140 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:** JEFFREY RYNOR**02/12/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name RYNOR, JEFFREY  
Address 301 ARTHUR GODFREY ROAD  
City-State-Zip: MIAMI BEACH FL 33130

Title T  
Name GOPMAN, GLENN  
Address 20590 WEST DIXIE HIGHWAY  
City-State-Zip: MIAMI FL 33180

Title SEC  
Name COLLER, ROBIN T  
Address 9480 SOUTHWEST 99TH STREET  
City-State-Zip: MIAMI FL 33176

Title D  
Name MERRITT, ROSALIND  
Address 1070 NORTHEAST 202ND TERRACE  
City-State-Zip: MIAMI FL 33179

Title PRESIDENT  
Name JACOBS, DOUG  
Address 16499 NE 19 AVE  
217  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title DIRECTOR  
Name FEIN, LORI  
Address 3525 MAGELLAN CIRCLE  
622  
City-State-Zip: AVENTURA FL 33180

Title CORRESPONDING SECRETARY  
Name PHILIPSON, CORNELIA  
Address C/O ROSALIND MERRITT  
1070 NE 202 TERRACE  
City-State-Zip: MIAMI FL 33179

Title DIRECTOR  
Name RYWELL, RUSSELL  
Address 2231 PRAIRIE AVENUE  
City-State-Zip: MIAMI BEACH FL 33139

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:** GLENN H GOPMAN**TREASURER****02/12/2013**

Electronic Signature of Signing Officer/Director Detail

Date