

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000003680

**Entity Name:** MIAMI BEACH GARDEN CLUB, INC.**Current Principal Place of Business:**MIAMI BEACH BOTANICAL GARDEN  
2000 CONVENTION CENTER DR.  
MIAMI BEACH, FL 33139**Current Mailing Address:**5930 N BAYSHORE DRIVE  
MIAMI , FL 33137 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLARK, JUDY  
5930 N BAYSHORE DRIVE  
MIAMI, FL 33137 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:** JUDY CLARK

02/10/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GUNN, LETICIA  
Address        8915 NE 9TH AVENUE  
City-State-Zip: MIAMI FL 33138

Title            FIRST VICE PRESIDENT  
Name            WENDELL, PATRICIA  
Address        800 WEST AVENUE  
                  #946  
City-State-Zip: MIAMI BEACH FL 33139

Title            T/D  
Name            CLARK, JUDY  
Address        5930 NORTH BAYSHORE DRIVE  
City-State-Zip: MIAMI FL 33137

Title            2VP  
Name            KLEIN, ELLEN  
Address        6356 ALTON ROAD  
City-State-Zip: MIAMI BEACH FL 33141

Title            THIRD VICE PRESIDENT  
Name            HOFELDT, MARGO  
Address        11 ISLAND AVENUE  
                  1001  
City-State-Zip: MIAMI BEACH FL 33139

Title            CORRESPONDING SECRETARY  
Name            GROSSMAN, ANITA  
Address        4539 N MERIDIAN AVENUE  
City-State-Zip: MIAMI BEACH FL 33140

Title            RECORDING SECRETARY  
Name            KAHN, GIINGER  
Address        635 MALALEUCA LANE  
City-State-Zip: MIAMI FL 33137

*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:** JUDY CLARK**TREASURER**

02/10/2020

Electronic Signature of Signing Officer/Director Detail

Date