2023 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 03/29/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **PRESIDENT** Title SECOND VICE PRESIDENT Name GROSSMAN, ANITA Name COURTNEY, MARGARITA Address 4539 N. MERIDIAN AVENUE Address 5151 PINE TREE DRIVE City-State-Zip: MIAMI BEACH FL 33140 City-State-Zip: MIAMI BEACH FL 33140

Title TREASURER Title FIRST VICE PRESIDENT

Name WENDELL, PATRICIA Name YARED, WENDY

Address 800 WEST AVENUE Address 2301 FLAMINGO DRIVE

946 City-State-Zip: MIAMI BEACH FL 33139

Title CORRESPONDING SECRETARY
Title THIRD VICE PRESIDENT

Name GUNN, LETICIA Name KRAUSE, KATIE

Address 8915 NE 9TH AVENUE Address 125 NW 48 STREET

City-State-Zip: MIAMI FL 33128

City-State-Zip: MIAMI FL 33138

Title RECORDING SECRETARY

 Name
 GATZ, MINDY

 Address
 900 NE 89 STREET

 City-State-Zip:
 MIAMI FL 33138

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: PATRICIA WENDELL TREASURER 03/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 29, 2023

Secretary of State

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