

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003969

**FILED**  
**Sep 26, 2014**  
**Secretary of State**  
**CC2694838825**

**Entity Name:** GERMAN AMERICAN ALLIANCE OF FLORIDA, INC.

**Current Principal Place of Business:**

100 N BISCAYNE BLVD  
2100  
MIAMI, FL 33132

**Current Mailing Address:**

100 N BISCAYNE BLVD, STE 2100  
MIAMI, FL 33132

**FEI Number:** 20-1768889

**Certificate of Status Desired:** No

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

MALFELD, GARY  
7875 N.W. 12 STREET  
113  
DORAL, FL 33126 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name BAUR, THOMAS  
Address 100 N BISCAYNE BLVD  
2100  
City-State-Zip: MIAMI FL 33132

Title VP, D  
Name CLAUS, MICHAEL  
Address C/O HELLMAN NETWORK, INC.  
10450 DORAL BOULEVARD 200  
City-State-Zip: DORAL FL 33178

Title TD  
Name MALFELD, GARY  
Address 7875 N.W. 12 STREET  
City-State-Zip: DORAL FL 33126

Title D  
Name BIEDERMANN, FRANK  
Address 15485 SW 147 STREET  
City-State-Zip: MIAMI FL 33196

Title SD  
Name WILLUMSEN, MARIA  
Address 10345 S.W. 128 CT.  
City-State-Zip: MIAMI FL 33186

Title D  
Name ANDING, VOLKER  
Address 600 BILTMORE WAY  
# 1114  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name DUESTER, JACQUELINE  
Address 15350 S.W. 83 COURT  
City-State-Zip: PALMETTO BAY FL 33157

*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:** GARY D. MALFELD

**TREASURER/DIRECTOR**

**09/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date