### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10789

Entity Name: ARTS & BUSINESS COUNCIL OF MIAMI, INC.

**FILED** Feb 05, 2024 **Secretary of State** 7704048891CC

## **Current Principal Place of Business:**

**1637 SW 8 STREET** 

211

MIAMI, FL 33135

## **Current Mailing Address:**

PO BOX 012100 MIAMI, FL 33101 US

FEI Number: 59-2593330 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

BRUNEY, LAURA **1637 SW 8 STREET** 211 MIAMI, FL 33135 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

Officer/Director Detail:

Title DIRECTOR Title

BRUNEY, LAURA GIBEL, ROSANNE Name Name **1637 SW 8 STREET** 21355 E DIXIE HWY Address Address

City-State-Zip: MIAMI FL 33135

City-State-Zip: AVENTURA FL 33180

Title **DIRECTOR** Title **DIRECTOR** 

Name LABOUREAU, SEBASTIEN Name FUERTES, PAMELA 1504 BAY ROAD #823 Address 300 N 2 AVENUE Address City-State-Zip: MIAMI BEACH FL 33139

City-State-Zip: MIAMI FL 33132

Title **TREASURER** Title **DIRECTOR** 

Name LEVERETT, KYLE Name COPELAND, JOHN

2699 SOUTH BAYSHORE DR Address Address 701 BRICKELL AVE 2700

MIAMI FL 33133 City-State-Zip:

City-State-Zip: MIAMI FL 33131 Title DIRECTOR

Title **SECRETARY** GONZALEZ, JOSE Name

COPPALECCHIA, ELIZABETH Name PO BOX 141916 Address

Address 2525 PONCE DE LEON BLVD City-State-Zip: MIAMI FL 33134

700

City-State-Zip: CORAL GABLES FL 33134

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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.

02/05/2024 SIGNATURE: LAURA ANN BRUNEY PRESIDENT & CEO

Date

### Officer/Director Detail Continued:

Title CHAIRMAN

Name BUDET, MARIA

Address 80 SW 8 ST

2400

City-State-Zip: MIAMI FL 33130

Title EXECTIVE DIRECTOR

Name PESCI, RENEE

Address 1637 SW 8 STREET

211

City-State-Zip: MIAMI FL 33135

Title DIRECTOR

Name GENNA, GINA

Address 100 CHOPIN PLAZA

City-State-Zip: MIAMI FL 33131

Title DIRECTOR Name HILLS, KIM

Address 200 S BISCAYNE BLVD

2929

City-State-Zip: MIAMI FL 33131

Title DIRECTOR

Name PHIPPS, ALEXANDRA Address 3310 MARY STREET

501

City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR
Name HICKS, JOHN

Address 2780 NE 183 STREET

711

City-State-Zip: AVENTURA FL 33160

Title DIRECTOR

Name ANDERSON, MATT

Address 150 SE 2ND AVENUE

914

City-State-Zip: MIAMI FL 33131

Title DIRECTOR

Name EDWARDS, DALE

Address 1300 BISCAYNE BLVD

City-State-Zip: MIAMI FL 33131

Title DIRECTOR

Name MALKIN, ANNETTE

Address 260 95 STREET

206

City-State-Zip: SURFSIDE FL 33141