

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 05, 2009  
Secretary of State**

DOCUMENT# 702550

Entity Name: WERTHEIM FLAGLER GABLES BENEVOLENT ASSOCIATION, INC.

**Current Principal Place of Business:**

8500 SW 92 STREET  
SUITE 106  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

8500 SW 92 STREET  
SUITE 106  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 59-0815805      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COLLER, PHILIP L  
8500 SW 92 STREET, SUIT 106  
MIAMI, FL 33156      US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COLLER, PHILIP L  
Address: 8500 SW 92 ST #106  
City-St-Zip: MIAMI, FL 33156

Title: VPTD ( ) Delete  
Name: MORRIS, HARVEY  
Address: 17901 SW 89 COURT  
City-St-Zip: MIAMI, FL 33157

Title: SD ( ) Delete  
Name: WEINBERG, BERNARD  
Address: 13707 SW 66 ST #405C  
City-St-Zip: MIAMI, FL 33183

Title: D ( ) Delete  
Name: LOWE, SIDNEY  
Address: 18900 SW 92 AVENUE  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPTD (X) Change ( ) Addition  
Name: MORRIS, HARVEY  
Address: 8292 SUNMEADOW LANE UNIT A  
City-St-Zip: BOCA RATON, FL 33496

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PHILIP L. COLLER

P

03/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date