

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707049

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** COCONUT GROVE ARTS & HISTORICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

3390 MARY STREET SUITE 128  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

3390 MARY STREET  
SUITE 128  
COCONUT GROVE, FL 33133 US

**Current Mailing Address:**

3390 MARY STREET SUITE 128  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

3390 MARY STREET  
SUITE 128  
COCONUT GROVE, FL 33133 US

**FEI Number:** 59-1652630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TRAINER, MONTGOMERY  
3390 MARY STREET SUITE 128  
COCONUT GROVE, FL 33133 US

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

TRAINER, MONTGOMERY  
3390 MARY STREET  
SUITE 128  
COCONUT GROVE, FL 33133 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:

01/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: EADS, HARVEY C JR.  
Address: 3390 MARY STREET SUITE 128  
City-St-Zip: COCONUT GROVE, FL 33133

Title: VCD  
Name: STEINGOLD, MARSHALL  
Address: 3390 MARY STREET SUITE 128  
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD  
Name: SWEENEY, DONNA  
Address: 3390 MARY STREET SUITE 128  
City-St-Zip: COCONUT GROVE, FL 33133

Title: P  
Name: TRAINER, MONTGOMERY  
Address: 3390 MARY STREET SUITE 128  
City-St-Zip: COCONUT GROVE, FL 33133

Title: TD  
Name: GARCIA, LOLA  
Address: 3390 MARY STREET SUITE 128  
City-St-Zip: COCONUT GROVE, FL 33133

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: MONTGOMERY TRAINER

P

01/17/2012

Electronic Signature of Signing Officer or Director

Date