

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707465

FILED
Apr 16, 2007
Secretary of State

Entity Name: BIG BROTHERS/BIG SISTERS OF GREATER MIAMI, INC.

Current Principal Place of Business:

701 S.W. 27TH AVENUE
SUITE 800
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

701 S.W. 27TH AVENUE
SUITE 800
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-6166904 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MUNIZ, LYDIA I MS.
701 S.W. 27TH AVENUE
SUITE 800
MIAMI, FL 33135 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: C () Delete
Name: VILLOCH, ALEXANDRA
Address: 1425 ROBBIA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: CE () Delete
Name: GLOTTMAN, JACK
Address: 560 LAKEVIEW DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: T () Delete
Name: PRINZING, DANIEL
Address: 5900 SW 86 STREET
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: BEVERIDGE, BRETT
Address: 4775 PINE DRIVE
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: EICHNER, ROBERT
Address: 9041 FROUDE AVENUE
City-St-Zip: SURFSIDE, FL 33154

Title: CEO () Delete
Name: MUNIZ, LYDIA I
Address: 1631 BAY DRIVE
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: LYDIA I MUNIZ

CEO

04/16/2007

Electronic Signature of Signing Officer or Director

_____ Date