

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707465

FILED
Mar 19, 2009
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: GLOTTMAN, JACK
Address: 560 LAKEVIEW DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: CE () Delete
Name: FOYO, GEORGE W
Address: 430 GRAND BAY DRIVE APT. 201
City-St-Zip: KEY BISCAVNE, FL 33149

Title: T () Delete
Name: JONES, WILLIAM J
Address: 470 NE 51 STREET
City-St-Zip: MIAMI, FL 33137

Title: S () Delete
Name: FARNSWORTH, CRAIG W
Address: 2451 BRICKELL AVENUE #12-S
City-St-Zip: MIAMI, FL 33129

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: C (X) Change () Addition
Name: FOYO, GEORGE W
Address: 430 GRAND BAY DRIVE, APT. 201
City-St-Zip: KEY BISCAVNE, FL 33149

Title: CE (X) Change () Addition
Name: GOLDMAN, JOEL
Address: 8920 SW 61ST COURT
City-St-Zip: PINECREST, FL 33156

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

Title: S (X) Change () Addition
Name: BURKETT, MARTIN
Address: 434 NORTH EAST 95TH STREET
City-St-Zip: MIAMI, FL 33138

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: LYDIA I. MUNIZ

CEO

03/19/2009

Electronic Signature of Signing Officer or Director

Date