2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710630

Apr 29, 2009 Secretary of State

Entity Name: MIAMI BEACH BAR ASSOCIATION

US

Current Principal Place of Business: New Principal Place of Business:

5420 NORTH BAY ROAD MIAMI BEACH, FL 33140 US

Current Mailing Address: New Mailing Address:

5420 NORTH BAY ROAD MIAMI BEACH, FL 33140

FEI Number: 59-2291789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HERTZ, STEPHEN G 767 ARTHUR GODFREY ROAD MIAMI BEACH, FL 331403413 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BRUCE, REICH
 Name:
 JAMIE, DAVIS S

 Address:
 767 ARTHUR GODFREY ROAD
 Address:
 150 ALHAMBRA CIRCLE, SUITE 1150

 City-St-Zip:
 MIAMI BEACH, FL 33140 US
 City-St-Zip:
 CORAL GABLES, FL 33134 US

Title: S () Delete Title: VP (X) Change () Addition

Name: SCHWARTZ, ELIZABETH Name: SQUIRES, GILBERT
Address: 560 LINCOLN ROAD, SUITE 400 Address: 767 ARTHUR GODFREY ROAD

Address: 560 LINCOLN ROAD, SUITE 400 Address: 767 ARTHUR GODFREY ROAD City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: MIAMI BEACH, FL 33140 US

Title: TD () Delete Title: () Change () Addition

 Name:
 JUDITH, FRANKEL
 Name:

 Address:
 5420 NORTH BAY ROAD
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140 US
 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: JUDITH A. FRANKEL T 04/29/2009