**FILED** 

305-626-3701

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Sep 10, 2001 8:00 am Secretary of State DOCUMENT # 717381 1. Entity Name 09-10-2001 90062 013 \*\*\*\*70.00 MORNINGSIDE CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address 527 NE 56TH STREET 527 NE 56TH STREET A0084611 MIAMI FL 33137-2622 MIAMI FL 33137-2622 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0134085 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROBERTSON, NEIL P 25 SE SECOND AVE. 600 INGERHAM BLDG. City Zip Code MIAMI FL 33131 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete PD X Change Addition TITLE TITLE HOPPER, W E NAME NAME Prelaz, Ed STREET ADDRESS STREET ADDRESS 527 NE 56TH ST 545 NE 55th Street CITY-ST-ZIP MIAMI FL 33137 CITY-ST-7IP Miámi, FL 33137 TITLE Delete TITLE Change ☐ Addition MEADOWS, G NAME NAME Parsons, Rachel STREET ADDRESS 5731 NE 6TH.AVE STREET ADDRESS 670 NE.59th-Street ---CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33137** Miami, FL 33137 TITLE X Delete TITLE XI Change ☐ Addition NAME NAME Hopper, William STREET ADDRESS STREET ADDRESS 527 NE 57TH ST. 527 NE 56th Street CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33137 Miami. FL 33137 Delete TITLE Change ☐ Addition TITLE TD NAME MULLALLY, P H NAME Cacace, Janice STREET ADDRESS STREET ADDRESS 479 NE 56TH ST 527 NE 57th Street CITY-ST-ZIP" CITY-ST-ZIP MIAMI FL 33137 Miami, FL 33137 Delete TITLE TITLE Change ☐ Addition NAME HLAS, T NAME Schaefer, Norah STREET ADDRESS 500 NE 50TH TERR STREET ADDRESS 598 NE 56th Street CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33137 Miami, FL 33137 ☐ Addition TITLE Delete X7 Change TITLE D MCCOY, PATRICK NAME NAME Foehrenbach, Mary STREET ADDRESS 679 NW 58TH ST. STREET ADDRESS 655 NE 55th Terrace CITY-ST-ZIP MIAMI FL 33137 Miami, FL 33137 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MULLEUIRED

SIGNATURE