

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719901

FILED
Jan 09, 2009
Secretary of State

Entity Name: OPERATING ENGINEERS LOCAL UNION #487 HOLDING COMPANY, INC.

Current Principal Place of Business:

1425 N.W. 36TH ST.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1425 N.W. 36TH ST.
MIAMI, FL 33142

New Mailing Address:

FEI Number: 23-7181548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBRITTON, JAMES O
5600 SW 166 AVENUE
SOUTHWEST RANCHES, FL 33331 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: VD () Delete
Name: BRABHAM, DAMON K.
Address: 5029 SW 6TH COURT
City-St-Zip: PLANTATION, FL

Title: MD () Delete
Name: WATERS, GARY,
Address: 9101 S.W. 54TH ST.
City-St-Zip: COOPER CITY, FL

Title: SD () Delete
Name: UTRERAS, WALBERTO
Address: 2832 SW 25 STREET
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: SINGER, SCOTT
Address: 21025 NE 25 STREET
City-St-Zip: MIAMI, FL 33180

Title: TD () Delete
Name: MULLEN, JOHN
Address: 1001 NE 3 AVENUE
City-St-Zip: BOCA RATON, FL 33432

Title: PD () Delete
Name: ALLBRITTON, JAMES O,
Address: 5600 SW 166 AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

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 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: WALBERTO UTRERAS

SD

01/09/2009

Electronic Signature of Signing Officer or Director

Date