2001 UNIFORM BUSINESS REPORT (UBR)

1082

DOCUMENT # 719937

1. Entity Name
MIAMI CITY MISSION, INC.

FILED
01 JUN 28 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1112 N. Miami Avenue Miami, FL 33238	1112 N. Miami Avenue Miami, FL 33238

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
225 Coral Road	225 Coral Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Islamorada, FL	City & State: Islamorada, FL
Zip: 33036 Country:	Zip: 33036 Country:

4. FEI Number: 59-1403788 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Ash, McKinley 1112 N. Miami Avenue Miami, FL 33136	Name: Ash, McKinley Street Address (P.O. Box Number is Not Acceptable): 225 Coral Road City: Islamorada FL Zip Code: 33036

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: McKinley Ash 06/27/2001 LS
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD Ash, McKinley 1112 N. Miami Avenue Miami, FL 33238	☐ Delete	PSD Ash, McKinley 225 Coral Road Islamorada, FL 33036	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Daly, Michael 191 N.E. 75th St., Apt. 601 Miami, FL	☒ Delete	VPD Smith, Eric Stewart 218 Lignumvitae Dr., Key Largo, FL 33037	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Webber, Daniel 1900 San Souci Blvd., Apt. 416 North Miami, FL 33181	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Malloy, Matt 3120 Oakland Shore Dr., D211 Ft. Lauderdale, FL 33309	☒ Delete	300004450723--1	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (11/00)

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: McKinley Ash 6/27/01 305/853-7065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

208

ACCOUNT NO. : 072100000032

REFERENCE : 203794 9270A

AUTHORIZATION : Patricia Piggott

COST LIMIT : $ 70.00

ORDER DATE : June 28, 2001

ORDER TIME : 1:26 PM

ORDER NO. : 203794-005

CUSTOMER NO: 9270A

CUSTOMER: Ms. Pamela Babson
Joe Miklas, P.a.
88765 Overseas Highway
Mile Marker 88.7
Tavernier, FL 33070-2029

ANNUAL REPORT FILING

RECEIVED
01 JUN 28 PM 2:27
DIVISION OF CORPORATION

NAME: MIAMI CITY MISSION, INC.

XX___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ PLAIN STAMPED COPY
XX____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull-EXT#

EXAMINER'S INITIALS: _____