

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738919

FILED
Apr 22, 2008
Secretary of State

Entity Name: UNITARIAN UNIVERSALIST CONGREGATION OF MIAMI, INC.

Current Principal Place of Business:

7701 S.W. 76 AVENUE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7701 S.W. 76 AVENUE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 59-0774186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROELANT, DAVID
7170 SW 103 CT CIRCLE
MIAMI, FL 33173 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: P () Delete
Name: JACOBBER, ROBERT L
Address: 12130 SW 107TH AVE
City-St-Zip: MIAMI, FL 33176

Title: VP () Delete
Name: ANDERSON, JOYCE
Address: 7341 SW 61 ST
City-St-Zip: MIAMI, FL 33143

Title: T () Delete
Name: ASGEIRSON, JOHN
Address: 5510 SW 76TH ST SUITE D
City-St-Zip: MIAMI, FL 33143

Title: VP () Delete
Name: PAUL, KAREN
Address: 540 MADEIRA AVE
City-St-Zip: CORAL GABLES, FL 33139

Title: S () Delete
Name: ROELANT, DAVID
Address: 15912 SW 64TH TERRACE
City-St-Zip: MIAMI, FL 33193

Title: TR () Delete
Name: MCARTHUR, JANICE
Address: 12130 SW 107TH AVE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOIBMAN, IRV L
Address: 915 NE 180 STREET
City-St-Zip: MIAMI, FL 33162

Title: VP (X) Change () Addition
Name: ROELANT, DAVID
Address: 7170 SW 103 CIRCLE COURT
City-St-Zip: MIAMI, FL 33173

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

Title: VP (X) Change () Addition
Name: HARBETT, JUNE
Address: 7762 SW 99 STREET
City-St-Zip: MIAMI, FL 33156

Title: S (X) Change () Addition
Name: SCOTT, GWLADYS
Address: 17010 SW 77 AVENUE
City-St-Zip: MIAMI, FL 331757

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: JOHN ASGEIRSON

T

04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date