

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739330

FILED
Jan 04, 2008
Secretary of State

Entity Name: NORTH MIAMI JAYCEES, INC.

Current Principal Place of Business:

12100 W. DIXIE HIGHWAY
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

12100 W. DIXIE HIGHWAY
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 59-1843588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SASLAW, GARY
20801 BISCAYNE BLVD
SUITE 304
N MIAMI BCH, FL 33180 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: MCDEARMAID, LISA
Address: 840 NE 127 ST.
City-St-Zip: NORTH MIAMI, FL 33161

Title: V () Delete
Name: JAMIESON, HEATHER
Address: 770 N.W. 148TH STREET
City-St-Zip: MIAMI, FL 33168

Title: V () Delete
Name: MORGAN, EVAN S
Address: 20220 N.E. 3RD COURT #8
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: T () Delete
Name: SOKOL, ALAN
Address: 18634 NE 18 AVE #238
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTS, LISA
Address: 840 NE 127 ST.
City-St-Zip: NORTH MIAMI, FL 33161

Title: () Change () Addition
Name:
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: SCOTT GALVIN

TREA

01/04/2008

Electronic Signature of Signing Officer or Director

Date