

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740812

FILED
Apr 22, 2009
Secretary of State

Entity Name: MIAMI BEACH SENIOR CITIZENS HOUSING DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

533 COLLINS AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1580 SAWGRASS CORPORATE PARKWAY
SUITE 210
FORT LAUDERDALE, FL 333232869

New Mailing Address:

FEI Number: 59-1894621 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: BAHR, MORTON
Address: 2737 DEVONSHIRE PL., N.W.
City-St-Zip: WASHINGTON, DC 20008

Title: D () Delete
Name: PROTULIS, STEVE
Address: 1580 SAWGRASS CORP. PKWY. #210
City-St-Zip: FORT LAUDERDALE, FL 33323 28

Title: SD () Delete
Name: CORDONE, MARIA
Address: 9000 MACHINISTS PLACE
City-St-Zip: UPPER MARLBORO, MD 20772

Title: VPD () Delete
Name: HOLAYTOR, WILLIAM J
Address: 900 E DANA DRIVE
City-St-Zip: SHELTON, WA 98584

Title: TD () Delete
Name: PHILLIPS, SUSAN L
Address: 7207 MAPLE AVENUE
City-St-Zip: TAKOMA PARK, MD 20912

Title: D () Delete
Name: DUBE, RAUL R
Address: 9380 SW 62 STREET
City-St-Zip: MIAMI, FL 33173

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:

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Title: () Change () Addition
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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: MORTON BAHR

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date