## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 752549** 

FILED Jan 12, 2009 Secretary of State

Entity Name: JUNIOR ACHIEVEMENT OF GREATER MIAMI, INC.

**Current Principal Place of Business: New Principal Place of Business:** 13490 NW 7TH AVENUE NORTH MIAMI, FL 33168 US **Current Mailing Address: New Mailing Address:** 13490 NW 7TH AVENUE NORTH MIAMI, FL 33168 US FEI Number: 59-0807486 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAGA, CATHERINE L 13490 NW 7TH AVENUE NORTH MIAMI, FL 33168 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition KAPLAN, MAXINE KAPLAN, MAXINE Name: Name: 2800 PONCE DE LEON BLVD Address: 200 EAST LAS OLAS Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: FT LAUDERDALE, FL 33301 Title: () Delete Title: () Change () Addition VELASCO, ISRAEL Name: Name: Address: 7900 MIAMI LAKES DRIVE WEST Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: () Delete Title: () Change () Addition LEVINSON, JEFF Name: Name: Address: 18841 NE 29 AVE Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition TEMPLETON, TROY Name: TEMPLETON, TROY Name: Address: 2665 S. BAYSHORE DR #800 Address: 550 SOUTH DIXIE HWY #300 City-St-Zip: MIAMI, FL 33133 City-St-Zip: CORAL GABLES, FL 33146 Title: ( ) Delete Title: () Change () Addition HERNANDEZ, JOSEPH Name: Name: 1111 BRICKELL AVENUE Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition HAGA, CATHERINE L Name: Name: Address: 13490 NW 7TH AVENUE Address: NORTH MIAMI, FL 33168 City-St-Zip: 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: CATHERINE L. HAGA PRES 01/12/2009