

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755002

FILED
Apr 29, 2011
Secretary of State

Entity Name: MIAMI CHAPTER OF THE AMERICAN INSTITUTE OF ARCHITECTS, INC.

Current Principal Place of Business:

275 UNIVERISYT DR
CORAL GABLES, FL 33134

New Principal Place of Business:

275 UNIVERSITY DR
CORAL GABLES, FL 33134

Current Mailing Address:

275 UNIVERISYT DR
CORAL GABLES, FL 33134

New Mailing Address:

275 UNIVERSITY DR
CORAL GABLES, FL 33134

FEI Number: 59-6151172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRAZLAVSKY, MIJEL
275 UNIVERISYT DR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

BILBAO, MICHELLE M
275 UNIVERSITY DR
CORAL GABLES, FL 33134 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: MICHELLE M. BILBAO

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CAMPANERIA, VIRGILIO
Address: 1221 BRICKELL AVE SUITE 1220
City-St-Zip: MIAMI, FL 33131

Title: VPD
Name: TOWNSEND, LEONARD O
Address: 3740 S. OCEAN BOULEVARD- UNIT NO. 303
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VPD
Name: CORDOVA, JAVIER E
Address: 2601 S. BAYSHORE DRIVE 10TH FLOOR
City-St-Zip: MIAMI, FL 33133

Title: VPD
Name: ALEJANDRO, SILVA
Address: 135 SAN LORENZO AVENUE- SUITE 880
City-St-Zip: CORAL GABLES, FL 33146

Title: STD
Name: MIGUEL, RODRIGUEZ
Address: 2121 PONCE DE LEON BOULEVARD - SUITE1010
City-St-Zip: CORAL GABLES, FL 33132

Title: D
Name: SOTO, NATIVIDAD
Address: 1500 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE M BILBAO

AD

04/29/2011

Electronic Signature of Signing Officer or Director

Date