2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# 758875

Entity Name: SOUTH FLORIDA FREE BEACHES/FLORIDA NATURIST ASSOCIATION, INC.

Current Principal Place of Business:

3650 NW 181 STREET
MIAMI, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 530306
MIAMI SHORES, FL 331530306 US

New Mailing Address:

FEI Number: 65-0671645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASON, RICHARD
3650 NW 181 STREET
MIAMI, FL 33056 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: MASON, RICHARD
Address: 3650 NW 181 STREET
City-St-Zip: MIAMI, FL 33056

Title: VD ( ) Delete
Name: MITCHELL, NORMA
Address: 3800 SW 142 AVE.
City-St-Zip: DAVIE, FL 33330

Title: SD ( ) Delete
Name: BAUM, DAVID
Address: 1709 NORTH 41 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD ( ) Delete
Name: PANTALEON, ALBERT
Address: 100 BAYVIEW DRIVE, NO.2118
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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:

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: ALBERT PANTALEON TD 03/17/2009

Electronic Signature of Signing Officer or Director — Date