2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2009
Secretary of State

DOCUMENT# 759684

Entity Name: MUSEUM OF CONTEMPORARY ART, INC.

Current Principal Place of Business:

770 NE 125TH ST.
NORTH MIAMI, FL 331615654

New Principal Place of Business:

Current Mailing Address:

770 NE 125TH ST.
NORTH MIAMI, FL 331615654

New Mailing Address:

FEI Number: 59-2085261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ANDERSON, SHELDON MR.
700 BRICKELL AVE, 3 FL
MIAMI, FL 33131 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:	T	( ) Delete
Name:	BIRBRAGHER, FRANCINE	
Address:	7000 ISLAND BLVD #2302	
City-St-Zip:	AVENTURA, FL 33160	
Title:	T	( ) Delete
Name:	KLEIN, JACQUELYN MS.	
Address:	25 PELICAN DR	
City-St-Zip:	FORT LAUDERDALE, FL 33301	
Title:	T	( ) Delete
Name:	BRAMAN, IRMA	
Address:	ONE INDIAN CREEK ISLAND	
City-St-Zip:	MIAMI BEACH, FL 33154	
Title:	D	( ) Delete
Name:	CLEARWATER, BONNIE	
Address:	770 NE 125TH STREET	
City-St-Zip:	NORTH MIAMI, FL 33161	
Title:	T	( ) Delete
Name:	NASH, CYNTHIA MRS.	
Address:	1433 W. 22 STREET	
City-St-Zip:	MIAMI BEACH, FL 33140	
Title:	T	( ) Delete
Name:	ANDERSON, SHELDON	
Address:	700 BRICKELL AVE, 4 FL	
City-St-Zip:	MIAMI, FL 33131	

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:	
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: BONNIE CLEARWATER D 09/04/2009

Electronic Signature of Signing Officer or Director — Date