

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90109 033 ****61.25

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DOCUMENT # 766236

1. Corporation Name

CITY CLUB OF MIAMI, INC.

Principal Place of Business

2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

Mailing Address

2800 POST OAK BLVD STE 5000
HOUSTON TX 77056



2. Principal Place of Business

21 Same As Above

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26 Same As Above

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

12/21/1982

4. FEI Number

76-0092723

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

HOWE, OSMOND C., JR.
SOUTHEAST FINANCIAL CENTER, SUITE 4500
200 SOUTH BISCAYNE BLVD
MIAMI FL 33131-2387

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent; or, both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD SHANAHAN, KEVIN C

NAME
STREET ADDRESS
CITY-ST-ZIP
2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

TITLE TD REX ROHM

NAME
STREET ADDRESS
CITY-ST-ZIP
2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

TITLE D VOYLES, ROBERT C

NAME
STREET ADDRESS
CITY-ST-ZIP
2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

TITLE ASS CYNTHIA A KRIST

NAME
STREET ADDRESS
CITY-ST-ZIP
2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

TITLE ASS JEANINE E HUTCHENS

NAME
STREET ADDRESS
CITY-ST-ZIP
2800 POST OAK BLVD STE 5000
HOUSTON TX 77056

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CYNTHIA A. KRIST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CYNTHIA A. KRIST

Vice President

4/23/99 (113) 966-5436

Date Daytime Phone #

CR2E037 (11/98)