2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0000001158



06-23-2003 90060 013 ****70.00

FILED

Secretary of State

Jun 23, 2003 8:00 am

THE VIZCAYA VOLUNTEER GUIDES, INC. Principal Place of Business Mailing Address 3251 SOUTH MIAMI AVENUE 3251 SOUTH MIAMI AVENUE MIAMI FL 33129 MIAMI FL 33129 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1760269 Applied For Not Applicable 7in Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MOOERS, EUZABETH.E. 2521 INAGUA AVE **MIAMI FL 33133** MIAMI BEACH 8. 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. I am familiar with, and accept SIGNATURE Ç 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Addition TITLE Delete ☐ Change TITLE NAME WHITCOMB, MARY A NAME TRENE AXLER 410 MILLER ROAD CORAL GABLES, FL 33146 3800 RIVIERA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33134 CITY-ST-ZIP D
YASMINE GONZALEZ
1209 FERDINAND ST
CORAL GABLES, FL 33/34 TITLE ☐ Delete TITLE DEAGUERO, RICHARD NAME NAME STREET ADDRESS **1200 SW 17 TERRACE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33145** Delete TITLE MAURINE HARRISON TITLE WHITEOMB, MARY A NAME NAME 446 ALHAMBRA CIRCLE 3800 RIVIERA DR STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33/34 CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL TITLE TITLE **Z** Addition ☐ Delete GLORIA ZANNIS 751 MALAGA NAME NAME STREET ADDRESS STREET ADDRESS CORAL GABLES, FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE D-TREAS P. RANDOLPH REICH NAME NAME STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33/41 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other RORANDOLPH REICH 6/17/03

SIGNATURE: