2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N00000005614

Entity Name: UNITED STATES LIFESAVING ASSOCIATION MIAMI BEACH, INC.

Current Principal Place of Business:

1001 OCEAN DRIVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1001 OCEAN DRIVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOCANEGRA, LUCAS
1001OCEAN DRIVE
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

YOUNG, ROBERT
1001 OCEAN DRIVE
MIAMI BEACH, FL 33139 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: ROBERT YOUNG 01/28/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: HORNBY, DONALD
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: C ( ) Delete
Name: GEDDES, WILLIAM
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: SEC ( ) Delete
Name: EMERSON-SMITH, LEIGH
Address: 1001 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: T (X) Delete
Name: MUNOZ, REBECA
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: T (X) Delete
Name: CANELLAS, JOHN
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT (X) Delete
Name: OPPENBORN, HENRY L III
Address: 819 NORTH 13 AVE
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: WILLIAM, GEDDES
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: C (X) Change ( ) Addition
Name: SECA, MIKE
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: SEC (X) Change ( ) Addition
Name: CANELLAS, JOHN
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

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: ROBERT YOUNG T 01/28/2008
Electronic Signature of Signing Officer or Director Date