2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 22, 2009
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:

YOUNG, ROBERT
1001 OCEAN DRIVE
MIAMI BEACH, FL 33139 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: VP ( ) Delete
Name: SICA, MIKE
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: TRES ( ) Delete
Name: YOUNG, ROBERT
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: DAVILA, MILTON
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

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

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

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

Title: PR ( ) Change (X) Addition
Name: PIAGGIO, JAYDA
Address: 1001 OCEAN DR
City-St-Zip: MIAMI BEACH, FL 33139

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 TRES 06/22/2009

Electronic Signature of Signing Officer or Director Date