2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006447

FILED Apr 18, 2009 Secretary of State

Entity Name: MIAMI CHAPTER OF AMERICAN RECORDER SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

1450 BRICKELL BAY DR. 13420 SW 112 LANE APT 303 MIAMI, FL 33186 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1450 BRICKELL BAY DR. 13420 SW 112 LANE APT 303 MIAMI, FL 33186 MIAMI, FL 33131

FEI Number: 31-1810960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARRAFFO, ZULEMA D HOAR, PHYLLIS E
1450 BRICKELL BAY DR. 13420 SW 112 LANE
APT 303 MIAMI, FL 33186 US
MIAMI, FL 33131 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: PHYLLIS E. HOAR 04/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 GARRAFFO, ZULEMA D
 Name:
 TRENCHER, RUTH

 Address:
 1450 BRICKELL BAY DR. APT 303
 Address:
 5901 SW 60TH STREET

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MIAMI, FL 33143

Title: TD () Delete Title: () Change () Addition Name: HOAR, PHYLLIS E Name:

 Name:
 HOAR, PHYLLIS E
 Name:

 Address:
 13420 SW 112 LANE
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

 $\label{eq:title:SD} \textit{Title:} \qquad \textit{SD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{SD} \qquad \textit{(X)} \; \textit{Change} \; \textit{()} \; \textit{Addition}$

 Name:
 TRENCHER, RUTH
 Name:
 PERLOVE, JÖYCE

 Address:
 5901 SW 60TH ST
 Address:
 1215 SW 15TH STREET

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 33145

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: PHYLLIS E. HOAR TD 04/18/2009