

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008613

FILED
May 20, 2008
Secretary of State

Entity Name: SUNNY ISLES BEACH CITIZENS COALITION, INC.

Current Principal Place of Business:

230 174 STR
305
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

230 174 STR
305
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAY, HENRY B
230 174 ST
305
SUNNY ISLES BEACH, FL 33160 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: P () Delete
Name: KAY, HENRY B
Address: 230 174 STREET, #305
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T () Delete
Name: TAFT, GLORIA
Address: 210 174 STREET, #2405
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP () Delete
Name: GABOR, HASSIDA
Address: 210 124 STREET, #903
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: S () Delete
Name: BEKOFF, AUDREY
Address: 210 174 STREET, #1802
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GLORIA TAFT

T

05/20/2008

Electronic Signature of Signing Officer or Director

Date