2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008
Secretary of State

DOCUMENT# N03000007425

Entity Name: NORTH MIAMI BEACH WATER FUND, INC.

Current Principal Place of Business:

17050 NE 19 AVE
N MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

17050 NE 19 AVE
N MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 57-1183732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENSINGER, MIRIAM W
17011 NE 19TH AVE
NORTH MIAMI BEACH, FL 33162 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: D ( ) Delete
Name: KLOPP, KEVEN
Address: 17011 NE 19TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: GABRIEL, SHAWN
Address: 17050 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D/O ( ) Delete
Name: BAKER, KELVIN
Address: 17050 NE 19TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: HARTMAN, GERALD C
Address: 201 E PINE STREET
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: COOK, CHARLES
Address: 1980 NE 175 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: GOODMAN, RICHARD
Address: 2014 NE 174 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition
Name: KLOPP, KEVEN
Address: 17011 NE 19TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: T (X) Change ( ) Addition
Name: GABRIEL, SHAWN
Address: 17050 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: P (X) Change ( ) Addition
Name: BAKER, KELVIN
Address: 17050 NE 19TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

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: KELVIN BAKER P 03/27/2008

Electronic Signature of Signing Officer or Director — Date