## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03485

FILED Jul 14, 2006 Secretary of State

Entity Name: MIAMI BACH SOCIETY, INC. **Current Principal Place of Business: New Principal Place of Business:** P O BOX 4034 CORAL GABLES, FL 33114 **Current Mailing Address: New Mailing Address:** P O BOX 4034 CORAL GABLES, FL 33114 FEI Number: 59-2429406 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: BERKE, MICHAEL A MR AKERMAN, SENTERFITT, 1 S.E.3RD AVENUE 29TH FLOOR 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MICHAEL, BERKE FALES, GORDON Name: Name: Address: 13420 98TH COURT Address: 6815 PALLAZZO STREET City-St-Zip: MIAMI, FL 33176 City-St-Zip: CORAL GABLES, FL 33146 Title: SD Title: ( ) Delete () Change () Addition Name: VEATER, CLAIRE W Name: Address: 10453 SW 114 STREET Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: VD (X) Delete Title: () Change () Addition FALES, GORDON Name: Name: 6815 PALLAZZO STREET Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: Title: DT ( ) Delete Title: () Change () Addition Name: BEWLEY, KINGSLEY Name: Address: 566 STONEMONT DRIVE Address: City-St-Zip: WESTON, FL 33326 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHRYN B. GAUBATZ EX.D 07/14/2006