## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000010477

FILED Oct 10, 2007 Secretary of State

Entity Name: SMART GROWTH NMB, INC.

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

831 NE 182 TERRACE 16499 NE 19 AVENUE

NORTH MIAMI BEACH, FL 33162 LIS #105

NORTH MIAMI BEACH, FL 33162 US

**Current Mailing Address:** New Mailing Address:

831 NE 182 TERRACE PO BOX 600822

NORTH MIAMI BEACH, FL 33162 FL NORTH MIAMI BEACH, FL 33160 FL

FEI Number: 26-0283055 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SCOTT, HEATHER A 2875 NÉ 191 STREET SUITE 500 AVENTURA, FL 33180 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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS: PRES** (X) Change ( ) Addition () Delete SICHAK, SCOTT PROPHETE, GOLDIE Name: Name: **831 NE 182 TERRACE** Address: 16499 NE 19 AVENUE, SUITE 105 Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: SECT () Delete Title: (X) Change ( ) Addition PROPHETE, GOLDIE Name: ARANGO, FRANZ Name: Address: 831 NE 182 TERRACE Address: 16499 NE 19 AVENUE, SUITE 105 City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: () Delete Title: ( ) Change (X) Addition SNELGROVE, CHRISTINE Name: Name: 16499 NE 19 AVENUE, SUITE 105 Address: Address: City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: () Delete Title: T/D ( ) Change (X) Addition Name: Name: KIENZLE, STEPHANIE Address: Address: 16499 NE 19 AVENUE, SUITE 105 City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: () Delete Title: ( ) Change (X) Addition SMITH, HARRY Name: Name: 16499 NE 19 AVENUE, SUITE 105 Address: Address: City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33162 Title: () Delete Title: ( ) Change (X) Addition MILLER, TRISH Name: Name: Address: Address: 16499 NE 19 AVENUE, SUITE 105 NORTH MIAMI BEACH, FL 33162 City-St-Zip: 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: STEPHANIE KIENZLE DIR 10/10/2007