

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007333

FILED
Apr 21, 2010
Secretary of State

Entity Name: THE MUSICAL ARTS ASSOCIATION OF MIAMI, INC.

Current Principal Place of Business:

200 S BISCAYNE BLVD SUITE 3300
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

200 S BISCAYNE BLVD SUITE 3300
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-5196415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MR
Name: LEWIS, DANIEL R CHAIR
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

Title: MR
Name: BRAMAN, NORMAN V-CHAIR
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

Title: MR
Name: FORTUN, HECTOR V-CHAIR
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

Title: MS
Name: BILZIN, MARSHA SEC
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

Title: MR
Name: ALAN, BERNSTEIN TREAS
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

Title: MR
Name: JAMES, MENDER A-TREAS
Address: 200 S BISCAYNE BLVD SUITE 3300
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: JAMES E. MENDER

ATRS

04/21/2010

Electronic Signature of Signing Officer or Director

Date