2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N06000007555

Entity Name: HBA INSURANCE FOUNDATION, INC.

Current Principal Place of Business:

2500 NW 79TH AVENUE
SUITE 101
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

2500 NW 79TH AVENUE
SUITE 101
MIAMI, FL 33122

New Mailing Address:

FEI Number: 20-4971953 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECKHAM, WILLIAM E
2500 NW 79TH AVENUE
SUITE 101
MIAMI, FL 33122 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: DP ( ) Delete
Name: BECKHAM, WILLIAM E
Address: 12500 VIRTUDES STREET
City-St-Zip: MIAMI, FL 33156

Title: DC ( ) Delete
Name: FREYE, ERNESTO
Address: 605 OCEAN DR. UNIT 5K
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T ( ) Delete
Name: HOLL, CARL
Address: 10060 SHERIDAN ST #109
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: MOLL, CARL
Address: 10060 SHERIDAN ST #109
City-St-Zip: PEMBROKE PINES, FL 33024

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: CARL MOLL T 04/16/2009

Electronic Signature of Signing Officer or Director — Date