

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010750

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** MONROE COUNTY BAR ASSOCIATION, INC.

**Current Principal Place of Business:**

608 WHITEHEAD STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4020  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HIGGINS, CARA  
608 WHITHEAD STREET  
KEY WEST, FL 33040 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: PRES  
Name: HIGGINS, CARA  
Address: 608 WHITHEAD ST.  
City-St-Zip: KEY WEST, FL 33040

Title: VP  
Name: POIST, CHRISTINE  
Address: 3306 HARRIET AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: SEC.  
Name: ROBERTSON, LORIELLEN  
Address: 801 EISENHOWER DRIVE  
City-St-Zip: KEY WEST, FL 33040

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:** CARA HIGGINS

PRES

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date