2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# N07000006657

Entity Name: INSURANCE WOMEN OF MIAMI INC

Current Principal Place of Business:

1314 E ATLANTIC BLVD
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

PO BOX 936654
MARGATE, FL 330936654

New Mailing Address:

FEI Number: 59-6150775 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERSON, MARILYN J
500 W. CYPRESS CREEK ROAD, STE 500
FT LAUDERDALE, FL 33309 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: P
Name: BRUNEZ, SUSAN M
Address: PO BOX 936654
City-St-Zip: MARGATE, FL 330936654

Title: VP
Name: NONE, NONE
Address: PO BOX 936654
City-St-Zip: MARGATE, FL 330936654

Title: S
Name: MYERS, SHARON R
Address: PO BOX 936654
City-St-Zip: MARGATE, FL 330936654

Title: T
Name: PETERSON, MARILYN J
Address: PO BOX 936654
City-St-Zip: MARGATE, FL 330936654

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: MARILYN J. PETERSON T 04/26/2012

Electronic Signature of Signing Officer or Director Date