

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003129

FILED
Jun 25, 2009
Secretary of State

Entity Name: THE EMPLOYEES CLUB OF FCI MIAMI, INCORPORATED

Current Principal Place of Business:

15801 SW 137TH AVE
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

15801 SW 137TH AVE
MIAMI, FL 33177

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NARDER, SCOTT
15801 SW 137TH AVE
MIAMI, FL 33177 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 () Delete
Name: NARDER, SCOTT
Address: 15801 SW 137TH AVE
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: SWORDS, MARK
Address: 15801 SW 137TH AVE
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: CHAFIN, BUDDY
Address: 15801 SW 137TH AVE
City-St-Zip: MIAMI, FL 33177

Title: T () Delete
Name: MORIN, TIM
Address: 15801 SW 137TH AVE
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: JONES, TONY
Address: 15801 SW 137TH AVE
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: TIM MORIN

T

06/25/2009

Electronic Signature of Signing Officer or Director

Date