

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000849

FILED
Apr 30, 2011
Secretary of State

Entity Name: MORTGAGE BANKERS ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

806 SOUTH DOUGLAS ROAD SUITE 580
CORAL GABLES, FL 33134

New Principal Place of Business:

400 UNIVERSITY DRIVE
3RD FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

806 SOUTH DOUGLAS ROAD SUITE 580
CORAL GABLES, FL 33134

New Mailing Address:

400 UNIVERSITY DRIVE
3RD FLOOR
CORAL GABLES, FL 33134

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PADRON, RUBEN J ESQ.
10261 SW 72 STREET SUITE 103
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

PADRON, RUBEN J ESQ.
9370 SW 72ND STREET
A-266
MIAMI, FL 33173 US

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: RUBEN J. PADRON

04/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CLAUS, CLAUDINE
Address: 400 UNIVERSITY DRIVE 3RD FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: SD
Name: ESTEBAN, ERNESTO
Address: 9190 BISCAYNE BLVD. SUITE 201A
City-St-Zip: MIAMI SHORES, FL 33138

Title: TD
Name: BENITEZ, PETER
Address: 730 N.W. 107 AVENUE SUITE 301
City-St-Zip: MIAMI, FL 33172

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: CLAUDINE CLAUS

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date