

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007584

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: MIAMI SOCIETY OF YOUNG PHILANTHROPISTS INC.

**Current Principal Place of Business:**

301 MADEIRA ST., # 2B  
CORAL GABLES, FL 33334 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 MADEIRA ST., # 2B  
CORAL GABLES, FL 33334 US

**New Mailing Address:**

FEI Number: 27-3226896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEBISH, BENJAMIN D  
301 MADEIRA ST.  
2B  
CORAL GABLES, FL 33134 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: LEBISH, BENJAMIN D  
Address: 301 MADEIRA ST APT. 2B  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP  
Name: BARRERA, OMAR F  
Address: 301 MADEIRA ST., # 2B  
City-St-Zip: CORAL GABLES, FL 33334 US

Title: TR  
Name: LANE, ANDREW D  
Address: 301 MADEIRA ST., # 2B  
City-St-Zip: CORAL GABLES, FL 33334 US

Title: SEC  
Name: TRUBA, NICOLE E  
Address: 301 MADEIRA ST., # 2B  
City-St-Zip: CORAL GABLES, FL 33334 US

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: ANDREW LANE

TR

01/05/2012

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

\_\_\_\_\_  
Date