

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000001962

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** THE MIAMI SHORES BAR ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

9999 NE 2ND AVENUE  
SUITE 211  
MIAMI SHORES,, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

9999 NE 2ND AVENUE  
SUITE 211  
MIAMI SHORES,, FL 33138

**New Mailing Address:**

**FEI Number:** 45-2498136

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KODSI, NEIL D  
9999 NE 2ND AVENUE  
SUITE 211  
MIAMI SHORES, FL 33138 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:** P1  
**Name:** ALDERMAN, JASON R  
**Address:** 9999 NE 2ND AVE. SUITE 211  
**City-St-Zip:** MIAMI SHORES, FL 33138

**Title:** P2  
**Name:** KODSI, NEIL D  
**Address:** 9999 NE 2ND AVE. SUITE 211  
**City-St-Zip:** MIAMI SHORES, FL 33138

**Title:** TR  
**Name:** HARKE, LANCE A  
**Address:** 9699 NE SECOND AVENUE  
**City-St-Zip:** MIAMI SHORES, FL 33138

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:** NEIL D KODSI

P2

04/28/2012

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

\_\_\_\_\_  
Date