

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010954

FILED
Feb 08, 2012
Secretary of State

Entity Name: MONTECRISTI TOURIST COUNCIL, INC.

Current Principal Place of Business:

90 EDGEWATER DRIVE, STE. 702
CORAL GABLES, FL 331336917

New Principal Place of Business:

90 EDGEWATER DRIVE
STE.702
CORAL GABLES, FL 33133 US

Current Mailing Address:

90 EDGEWATER DRIVE, STE. 702
CORAL GABLES, FL 331336917

New Mailing Address:

90 EDGEWATER DRIVE
STE.702
CORAL GABLES, FL 33133 US

FEI Number: 45-3912971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEREDITH, SPENCER B
90 EDGEWATER DRIVE, STE. 702
CORAL GABLES, FL 331336917 US

Name and Address of New Registered Agent:

MEREDITH, SPENCER B
90 EDGEWATER DRIVE
STE. 702
CORAL GABLES, FL 33133 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: SPENCER B. MEREDITH

02/08/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: MEREDITH, SPENCER B
Address: 90 EDGEWATER DRIVE, STE. 702
City-St-Zip: CORAL GABLES, FL 33133 US

Title: DVPS
Name: LUPIEN, SUSAN M
Address: 90 EDGEWATER DRIVE, STE. 702
City-St-Zip: CORAL GABLES, FL 33133 US

Title: DVP
Name: WINOGRAD, ANNE M
Address: 17202 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 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: SPENCER B. MEREDITH

DPT

02/08/2012

Electronic Signature of Signing Officer or Director

Date