

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 22, 2011
Secretary of State

DOCUMENT# N21544

Entity Name: THE CORAL GABLES BAR ASSOCIATION, INCORPORATED**Current Principal Place of Business:**1801 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134 US**New Principal Place of Business:**1401 BRICKELL AVENUE
SUITE 825
MIAMI, FL 33131 US**Current Mailing Address:**P.O. BOX 140189
PH
CORAL GABLES, FL 33114 US**New Mailing Address:**P.O. BOX 140189
CORAL GABLES, FL 33114 US**FEI Number:** 59-2823417**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MUIR, JANE
2655 SOUTH LEJEUNE ROAD
SUITE 500
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**RIERA-GOMEZ, KAYLA
1395 BRICKELL AVENUE
14TH FLOOR
MIAMI, FL 33131 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: KAYLA RIERA-GOMEZ

09/22/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BOUNDS, BRUCE M
Address: 1401 BRICKELL AVENUE, SUITE 825
City-St-Zip: MIAMI, FL 33131 US

Title: PED
Name: MUIR, JANE W
Address: 2601 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137 US

Title: TD
Name: RIERA-GOMEZ, KAYLA
Address: 1395 BRICKELL AVENUE, 14TH FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: SD
Name: PILA, TOMAS A
Address: 3191 CORAL WAY, SUITE 406
City-St-Zip: MIAMI, FL 33145 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: JANE W. MUIR

PED

09/22/2011

Electronic Signature of Signing Officer or Director

Date