2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2012
Secretary of State

DOCUMENT# N35048

Entity Name: MIAMI BEACH METHODIST CHILD CARE CENTER, INC.

Current Principal Place of Business:

4760 PINETREE DRIVE
MIAMI BEACH, FL 33140

New Principal Place of Business:

4760 PINE TREE DRIVE
MIAMI BEACH, FL 33140

Current Mailing Address:

4760 PINETREE DRIVE
MIAMI BEACH, FL 33140

New Mailing Address:

4760 PINE TREE DRIVE
MIAMI BEACH, FL 33140

FEI Number: 65-0221028 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CD
Name: BARFIELD, BRETT
Address: 701 BRICKELL AVE, SUITE 3000
City-St-Zip: MIAMI, FL 33131

Title: D
Name: ALEMAN, JB
Address: 5824 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: DE PONCE, ELIZABETH
Address: 11685 CANAL DRIVE # 209
City-St-Zip: NORTH MIAMI, FL 33181

Title: D
Name: TORRES, BRIAN M
Address: 5747 LAGORCE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: DAVIS, LAURIE K
Address: 4760 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

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: CYNTHIA RODRIGUEZ D 02/21/2012

Electronic Signature of Signing Officer or Director — Date