2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43524

FILED Feb 04, 2009 Secretary of State

Entity Name: BAY HARBOR ISLANDS CIVIC ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 546258 1100 KANE CONCOURSE, SUITE 210 BAY HARBOR ISLANDS, FL 33154 US BAY HARBOR ISLANDS, FL 33154 **Current Mailing Address: New Mailing Address:** PO BOX 546258 BAY HARBOR ISLANDS, FL 33154 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHORT, ALAN 9665 BÁY HARBOR TERRACE BAY HARBOR ISLANDS, FL 33154 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition COHN, PETER, Name: Name: Address: 9225 COLLINS AVE Address: City-St-Zip: MIAMI, FL 33154 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: KROOP, CEIL Name: KROOP, CEIL Address: 9240 W. BAY HARBOR DR. #6A Address: 9240 W. BAY HARBOR DR. #6A City-St-Zip: BAY HARBOR ISL, FL City-St-Zip: BAY HARBOR ISL, FL 33154

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER COHN PD 02/04/2009