

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000742

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: I.L.A. LOCAL NO. 1416 RETIREE CLUB INC.

**Current Principal Place of Business:**

816 NW 2ND AVE  
MIAMI, FL 33136

**New Principal Place of Business:**

**Current Mailing Address:**

816 N.W. 2ND AVE.  
MIAMI, FL 33136

**New Mailing Address:**

FEI Number: 65-0448906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLAXMAN, NEIL  
550 BILTMORE WAY  
STE 780  
CORAL GABLES, FL 33134 US

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

FLAXMAN, NEIL  
80 SW 8TH STREET  
STE 3100  
MIAMI, FL 33130 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: NEIL FLAXMAN

04/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIMMONS, ULYSSES  
Address: 816 N.W. 2ND AVE.  
City-St-Zip: MIAMI, FL 33136

Title: VP ( ) Delete  
Name: ADAMS, LEON  
Address: 941 NW 174TH ST  
City-St-Zip: MIAMI, FL 33169

Title: FS ( ) Delete  
Name: YOUNG, LINCOLN  
Address: 816 N.W. 2ND AVE.  
City-St-Zip: MIAMI, FL 33136

Title: T ( ) Delete  
Name: COLLINS, WALTER T  
Address: 816 NW 2ND AVE.  
City-St-Zip: MIAMI, FL 33136

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: COLEMAN, ALBERT JR  
Address: 816 N.W. 2ND AVE.  
City-St-Zip: MIAMI, FL 33136

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALBERT COLEMAN

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date