

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001504

FILED  
Mar 28, 2007  
Secretary of State

**Entity Name:** EXECUTIVE WOMEN'S GOLF ASSOCIATION OF MIAMI, INC.

**Current Principal Place of Business:**

2988 VIRGINIA ST  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 310548  
MIAMI, FL 33231 US

**New Mailing Address:**

**FEI Number:** 65-0569321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOENIG, KERSTIN  
2988 VIRGINIA ST  
MIAMI, FL 33133 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: PD ( ) Delete  
Name: SHERMAN, TRACY  
Address: PO BOX 310548  
City-St-Zip: MIAMI, FL 33231

Title: VPD ( ) Delete  
Name: BEIRO, OFELIA  
Address: 2100 CORAL WAY STE 304  
City-St-Zip: MIAMI, FL 33145

Title: SD ( ) Delete  
Name: CAVANVAUGH, CHARLENE  
Address: 6423 COLLINS AVE APT 1403  
City-St-Zip: MIAMI BEACH FL, FL 33141

Title: TD ( ) Delete  
Name: KOENIG, KERSTIN  
Address: 1101 BRICKELL AVE STE G-2  
City-St-Zip: MIAMI, FL 33131

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

Title: PD (X) Change ( ) Addition  
Name: BEIRO, OFELIA  
Address: 2100 CORAL WAY STE 304  
City-St-Zip: MIAMI, FL 33145

Title: VPD (X) Change ( ) Addition  
Name: ALLEY, SUSAN  
Address: 5270 SUNSET DR  
City-St-Zip: MIAMI, FL 33143

Title: SD (X) Change ( ) Addition  
Name: MARGIE, GABRIEL  
Address: 9454 SW 77TH AVE APT S8  
City-St-Zip: MIAMI, FL 33156

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KERSTIN KOENIG

TD

03/28/2007

Electronic Signature of Signing Officer or Director

Date