

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003800

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** SEMINOLE CLUB OF GREATER MIAMI, INC.

**Current Principal Place of Business:**

P.O. BOX 145220  
CORAL GABLES, FL 33114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 145220  
CORAL GABLES, FL 33114

**New Mailing Address:**

**FEI Number:** 65-0604167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CECIO, JULIAN J  
14910 SW 168 ST  
MIAMI, FL 33187 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: D ( ) Delete  
Name: LOMBARD, ED  
Address: 1111 BRICKELL AVE STE 2500  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: BORGES, JAVIER  
Address: 200 S BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: CECIO, JULIAN J  
Address: 14910 SW 168TH ST  
City-St-Zip: MIAMI, FL 33187

Title: D ( ) Delete  
Name: GAVIN, VALERIE  
Address: 5800 BLUE LAGOON DR  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: STARKE, LEONARDO  
Address: 3340 SW 32 AVE  
City-St-Zip: MIAMI, FL 33134

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

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

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

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 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: JULIAN J CECIO

D

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date