

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002996

FILED
Mar 11, 2009
Secretary of State

Entity Name: THE COUNTRY CLUB OF MIAMI CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

7336 BAY HILL DR
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

7336 BAY HILL DR
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 65-0675049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGAN, BARBARA S
7336 BAY HILL DRIVE
HIALEAH, FL 33015 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: HAGAN, BARBARA S
Address: 7336 BAY HILL DR
City-St-Zip: HIALEAH, FL 33015

Title: VD () Delete
Name: SALZMAN, DAVID
Address: 19401 W. ST. ANDREWS DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: S () Delete
Name: SHARPE, JUDITH
Address: 19300 E. LAKE DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: VD () Delete
Name: GERON, DIXON
Address: 19411 W OAKMONK DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: T () Delete
Name: PETTIS, JOSEPHINE
Address: 18900 WEST LAKE DR
City-St-Zip: HIALEAH, FL 33015

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 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: BARBARA S. HAGAN

PD

03/11/2009

Electronic Signature of Signing Officer or Director

Date