

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90177 040 ****61.25

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1. Entity Name

MIAMI BEACH BAR ASSOCIATION SCHOLARSHIP FUND, INC.



Principal Place of Business

C/O JUDITH FRANKEL
960 ARTHUR GODFREY ROAD, STE 116
MIAMI BEACH FL 33140

Mailing Address

C/O JUDITH FRANKEL
960 ARTHUR GODFREY ROAD, STE 116
MIAMI BEACH FL 33140



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0728729

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRANKEL, JUDITH A
960 ARTHUR GODFREY ROAD
SUITE 116
MIAMI BEACH FL 33140

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete
NAME ZEIGER, MITCHELL
STREET ADDRESS 16625 SW 74 CT
CITY-ST-ZIP MIAMI FL 33157

TITLE PED ☐ Delete
NAME SPILL, JOY
STREET ADDRESS 9100 S DADELAND BLVD STE 504
CITY-ST-ZIP MIAMI FL 33156

TITLE 1VPD ☐ Delete
NAME CONGORA, MICHAEL
STREET ADDRESS 767 ARTHUR GODFREY RD
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE TD ☐ Delete
NAME FRANKEL, JUDITH
STREET ADDRESS 960 ARTHUR GODFREY ROAD, STE 116
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition
NAME Spill, Joy
STREET ADDRESS 9100 S DADELAND BLVD, Suite 504
CITY-ST-ZIP Miami, FL 33156

TITLE PED ☒ Change ☐ Addition
NAME Congora, Michael
STREET ADDRESS 121 Alhambra Plaza, 10th Fl.
CITY-ST-ZIP Coral Gables, FLA. 33134

TITLE Secretary ☐ Change ☒ Addition
NAME Buirres, Gilbert
STREET ADDRESS 767 Arthur Godfrey Rd
CITY-ST-ZIP Miami Beach, FL 33140

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #