2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# N97000000219

Entity Name: THE VICTOR I. LOPEZ FOUNDATION FOR THE BADEN POWELL HOUSE IN MIAMI, INC.

Current Principal Place of Business:

2019 S.W. 16 STREET
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2019 S.W. 16 STREET
MIAMI, FL 33145

New Mailing Address:

FEI Number: 65-0731352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPEZ, VICTOR I
2019 S.W. 16 STREET
MIAMI, FL 33145 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:	S	( ) Delete
Name:	TARACIDO, CARLOS MD	
Address:	12021 SW. 37TH TERRACE	
City-St-Zip:	MIAMI, FL 33175	
Title:	V	( ) Delete
Name:	GARCES, VIVIAN	
Address:	1411 MILAN AVENUE	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	PC	( ) Delete
Name:	LOPEZ, VICTOR IVAN	
Address:	2019 S.W. 16 STREET	
City-St-Zip:	MIAMI, FL 33145	
Title:	T	( ) Delete
Name:	LOPEZ, CATHERINE	
Address:	2019 SW 16 STREET	
City-St-Zip:	MIAMI, FL 33145	
Title:	D	( ) Delete
Name:	HERNANDEZ, ANTONIO M.	
Address:	8218 VIA BELLA NATTE	
City-St-Zip:	ORLANDO, FL 32836	
Title:	D	( ) Delete
Name:	DOMINGUEZ, MARIANO	
Address:	6450 SW 135 AVE	
City-St-Zip:	MIAMI, FL 33183	

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:	
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: VICTOR I. LOPEZ PC 03/11/2009

Electronic Signature of Signing Officer or Director — Date