

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003264

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** NORTHEAST TENTH AVENUE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1320 NE 174 ST  
NO MIAMI BCH, FL 33162

**New Principal Place of Business:**

1320 NE 174 ST  
N MIAMI BEACH, FL 33162

**Current Mailing Address:**

P O BOX 640128  
NO MIAMI BCH, FL 33164

**New Mailing Address:**

1320 NE 174 ST  
N MIAMI BEACH, FL 33162

**FEI Number:** 65-0725016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HIRSCHFELD, DAVID  
17330 NE 10 CT.  
NORTH MIAMI BEACH, FL 33162 US

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

BAUER, WAYNE  
1320 NE 174 ST  
N MIAMI BEACH, FL 33162 US

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: WAYNE BAUER

04/25/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: IMBERMAN, BARBRA  
Address: 830 NE 168 ST.  
City-St-Zip: NO MIAMI BCH, FL 33162

Title: PD ( ) Delete  
Name: BAUER, WAYNE  
Address: 1320 NE 174 ST  
City-St-Zip: NO MIAMI BCH, FL 33162

Title: D ( ) Delete  
Name: KORROS, DAVID  
Address: 1051 NE 179 ST  
City-St-Zip: NO MIAMI BCH, FL 33162

Title: T ( ) Delete  
Name: HIRSCHFELD, DAVID  
Address: 17330 NE 10 CT.  
City-St-Zip: NO. MIAMI BEACH, FL 33162

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

Title: S (X) Change ( ) Addition  
Name: IMBERMAN, BARBRA S  
Address: 820 NE 168 ST.  
City-St-Zip: N MIAMI BEACH, FL 331622517 US

Title: PD (X) Change ( ) Addition  
Name: BAUER, WAYNE  
Address: 1320 NE 174 ST  
City-St-Zip: N MIAMI BEACH, FL 33162

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

Title: T (X) Change ( ) Addition  
Name: IMBERMAN, LEO  
Address: 820 NE 168 ST  
City-St-Zip: N MIAMI BEACH, FL 33162

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: BARBRA S IMBERMAN

S

04/25/2007

Electronic Signature of Signing Officer or Director

Date