

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 07, 2009  
Secretary of State

DOCUMENT# N98000005672

Entity Name: MIAMI RIVER FUND, INC.

**Current Principal Place of Business:**

1407 NW 7 ST  
SUITE D  
MIAMI, FL 33125

**New Principal Place of Business:**

**Current Mailing Address:**

1407 NW 7 ST  
SUITE D  
MIAMI, FL 33125

**New Mailing Address:**

FEI Number: 65-0867648      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BIBEAU, BRETT  
1407 NW 7 STREET  
SUITE D- C/O MIAMI RIVER FUND, INC  
MIAMI, FL 33125 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: BIBEAU, BRETT  
Address: 1407 NW 7 STREET, SUITE D  
City-St-Zip: MIAMI, FL 33125

Title: P ( ) Delete  
Name: EVERINGHAM, PHILIP  
Address: PO BOX 01930  
City-St-Zip: MIAMI, FL 33101

Title: D ( ) Delete  
Name: BAILY, MARK  
Address: 1170 NW 11ST  
City-St-Zip: MIAMI, FL 33125

Title: VP ( ) Delete  
Name: JUDE, SALLYE  
Address: 118 S.W. SOUTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: MOORE, MICHAEL  
Address: 355 ALHAMBRA CT SUITE 1100  
City-St-Zip: CORAL GABLES, 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: D (X) Change ( ) Addition  
Name: BAILEY, MARK  
Address: 1170 NW 11ST  
City-St-Zip: MIAMI, FL 33125

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: BRETT BIBEAU

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date