

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002695

1. Entity Name

REALTOR ASSOCIATION OF GREATER MIAMI AND THE BEACHES, INC.

Principal Place of Business

700 S. ROYAL POINCIANA BLVD.
SUITE 400
MIAMI FL 33166

Mailing Address

700 S. ROYAL POINCIANA BLVD.
SUITE 400
MIAMI FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0359750

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

KINNEY, TERESA K
700 S. ROYAL POINCIANA BLVD.
SUITE 400
MIAMI FL 33166

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☒ Delete
NAME MENDEZ, LIZA
STREET ADDRESS 419 WEST 49 STREET, #105
CITY-ST-ZIP HIALEAH FL

TITLE TD ☐ Change ☒ Addition
NAME Kowalski, Frank E.
STREET ADDRESS 9875 SW 72 St.
CITY-ST-ZIP Miami, FL 33173

TITLE SD ☒ Delete
NAME JACOBSON, ALAN W
STREET ADDRESS 3800 YACHT CLUB DR., #902
CITY-ST-ZIP MIAMI FL

TITLE SD ☐ Change ☒ Addition
NAME Dixon, Thomas J.
STREET ADDRESS 2600 Douglas Rd. #901
CITY-ST-ZIP Coral Gables, FL 33134

TITLE V ☐ Delete
NAME GRABILL, JERRY L
STREET ADDRESS ONE HARBOUR WAY, #306
CITY-ST-ZIP BAL HARBOUR FL

TITLE PD ☒ Change ☐ Addition
NAME Grabill, Gerald L.
STREET ADDRESS 825 Arthur Godfrey Rd. 1st Floor
CITY-ST-ZIP Miami Beach, FL 33140

TITLE PD ☒ Delete
NAME GOLDSTEIN, SANDRA
STREET ADDRESS 611 OCEAN DR., #2E
CITY-ST-ZIP KEY BISCAYNE FL

TITLE V ☐ Change ☒ Addition
NAME Valledor, Deborah
STREET ADDRESS 100 Almeria Ave. #230
CITY-ST-ZIP Coral Gables, FL 33134

TITLE M ☐ Delete
NAME KING KINNEY, TERESA
STREET ADDRESS 700 S. ROYAL POINCIANA BLVD., #400
CITY-ST-ZIP MIAMI FL 33166

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

TITLE ☐ Delete
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 exemption stated in Section 119.07(3)(i), 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.

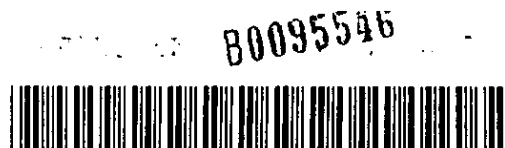
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305-468-7010
4-23-02
Teressa King Kinney



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)