

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701488

FILED  
Sep 13, 2008  
Secretary of State

**Entity Name:** THE MIAMI FRIENDS MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS, INC.

**Current Principal Place of Business:**

1185 SUNSET ROAD  
CORAL GABLES, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

1185 SUNSET ROAD  
CORAL GABLES, FL 33143

**New Mailing Address:**

**FEI Number:** 23-7372958      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ARANGO, JUDITH  
4180 LOQUAT AVE  
MIAMI, FL 33133    US

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

BEGIN, KARYN S  
1116 90TH ST.  
SURFSIDE, FL 33154    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: KARYN STUPEL BEGIN

09/13/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D            ( ) Delete  
Name: FORREST, PETER  
Address: 50 SW 68 AVE.  
City-St-Zip: MIAMI, FL 33144

Title: D            ( ) Delete  
Name: LANDOWNE, DAVID  
Address: 6926 S.W. 62ND CT.  
City-St-Zip: MIAMI, FL 33143

Title: T            ( ) Delete  
Name: ARANGO, JUDITH  
Address: 4180 LOQUAT AVENUE  
City-St-Zip: MIAMI, FL 33133

Title: P            ( ) Delete  
Name: EMERSON, DORIS  
Address: 914 EAST RIDGE VILLAGE DRIVE  
City-St-Zip: MIAMI, FL 33157

Title: D            ( ) Delete  
Name: O'SULLIVAN, GERALDINE  
Address: 7240 SW 64TH CT  
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D            ( ) Delete  
Name: SAMPIERI, JOAN  
Address: 9031 SW 62 TR  
City-St-Zip: MIAMI, FL 33173

**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: GERALDINE O'SULLIVAN

D

09/13/2008

Electronic Signature of Signing Officer or Director

Date