

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007584

**Entity Name:** MIAMI SOCIETY OF YOUNG PHILANTHROPISTS INC.

**Current Principal Place of Business:**

301 MADEIRA ST., # 2B  
CORAL GABLES, FL 33334

**Current Mailing Address:**

301 MADEIRA ST., # 2B  
CORAL GABLES, FL 33334 US

**FEI Number:** 27-3226896

**Certificate of Status Desired:** No

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

LEBISH, BENJAMIN D  
301 MADEIRA ST.  
2B  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LEBISH, BENJAMIN D  
Address 301 MADEIRA ST APT. 2B  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name BARRERA, OMAR F  
Address 301 MADEIRA ST., # 2B  
City-State-Zip: CORAL GABLES FL 33334

Title TR  
Name LANE, ANDREW D  
Address 301 MADEIRA ST., # 2B  
City-State-Zip: CORAL GABLES FL 33334

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANDREW LANE

MGMR

04/15/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date