

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701488

FILED
Feb 13, 2005
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 ()

Name and Address of Current Registered Agent:

HERRON, JUDITH
1036 POPLAR CIRCLE
WESTON, FL 33326 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: 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: HERRON, JUDITH
Address: 1036 POPLAR CIRCLE
City-St-Zip: WESTON, FL 33157

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

Title: D () Delete
Name: ROEDEMA, MARGARET
Address: 175 SE 25TH RD 8C
City-St-Zip: MIAMI, FL 33129

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DORIS M. EMERSON

P

02/13/2005

Electronic Signature of Signing Officer or Director

Date