

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90012 023 ****61.25

DOCUMENT # 715906

1. Entity Name

ROTARY FOUNDATION OF MIAMI, FLORIDA, INC.



Principal Place of Business

269 GIRALDA AVE
STE 302
MIAMI FL 33134
US

Mailing Address

269 GIRALDA AVE
STE 302
MIAMI FL 33134
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

23-7091199

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORGAN, NANCY C
269 GIRALDA AVE 302
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME DE ALMEIDA, JAIR
STREET ADDRESS 9737 NW 41 ST. #490
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Delete
NAME DAVIS, RICHARD
STREET ADDRESS 5531 RIVIERA DR
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☒ Delete
NAME GALPERIN, ARNOLD
STREET ADDRESS 5840 SW 116 ST.
CITY-ST-ZIP MIAMI FL 33156

TITLE ☒ Delete
NAME FREED, OWEN
STREET ADDRESS 550 PUERTA AVE
CITY-ST-ZIP CORAL GABLES FL 33143

TITLE ☐ Delete
NAME GOLDEN, RANDY
STREET ADDRESS 5015 LONDON WALK
CITY-ST-ZIP MIAMI FL 33138

TITLE ☐ Delete
NAME WIGGINS, JAMES
STREET ADDRESS 14500 SW 84 AVE
CITY-ST-ZIP MIAMI FL 33158

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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 exemptions contained in Section 119, 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:

Jan Arzina Treasurer