

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762509

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** THE MIAMI SHORES MAYOR'S COMMUNITY TASK FORCE, INC.

**Current Principal Place of Business:**

9617 PARK DR  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 531512  
MIAMI SHORES, FL 33153

**New Mailing Address:**

FEI Number: 59-2210193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DORN, MICHAEL C  
502 NE 106 ST  
MIAMI SHORES, FL 33138 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: DC  
Name: CALHOUN, CHERYL C  
Address: 9617 PARK DRIVE  
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: DVT  
Name: DORN, MICHAEL C  
Address: 502 NE 106 ST  
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: DS  
Name: MATOS, CARMEN M  
Address: 452 GRAND CONCOURSE  
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: DV  
Name: TAMMY, AUSTIN M  
Address: 9617 PARK DRIVE  
City-St-Zip: MIAMI SHORES, FL 33138 US

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: MICHAEL C. DORN

DVT

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date