

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 25, 2006  
Secretary of State**

DOCUMENT# N01000003759

Entity Name: FLORIDA FTAA FOUNDATION, INC.

**Current Principal Place of Business:**

BILTMORE CONFERENCE CENTER OF THE  
1200 ANASTASIA AVE # 500  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

BILTMORE CONFERENCE CENTER OF THE  
1200 ANASTASIA AVE # 500  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 59-3722353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CALDERON, INES  
1200 ANASTASIA AVE # 500  
CORAL GABLES, FL 33134      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: C      ( ) Delete  
Name: COBB, CHARLES E  
Address: 255 ARAGON AVENUE SUITE 333  
City-St-Zip: MIAMI, FL 33134  
  
Title: V      ( ) Delete  
Name: VILLAMIL, J. ANTONIO  
Address: 2655 LE JEUNE ROAD SUITE 608  
City-St-Zip: MIAMI, FL 33134  
  
Title: P      ( ) Delete  
Name: DEAN, BRIAN C  
Address: 1200 ANESTASIA AVENUE, SUITE 500  
City-St-Zip: MIAMI, FL 33134

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: J. ANTONIO VILLAMIL

V

07/25/2006

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

\_\_\_\_\_  
Date