2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Mar 21, 2007 8:00 am Secretary of State DOCUMENT # N12008 03-21-2007 90029 034 ****70 00 LEAGUE OF WOMEN VOTERS OF MIAMI-DADE COUNTY **EDUCATION FUND, INC.** Principal Place of Business Mailing Address 00040041 5783 BIRD RD. 5783 BIRD RD. #146 #146 MIAMI, FL 33155 MIAMI, FL 33155 US US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2716577 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STIERHEIM, JUDITH C Street Address (P.O. Box Number is Not Acceptable) **6720 SW 124TH STREET** MIAMI, FL 33156 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 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE TITLE ☐ Change 7) Delete Marks, Dorrit 10715 SW 74th Court NAME MILLER, KIMBERLY T 6805 GLEN EAGLE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI LAKE, FL 33014 CITY-ST-ZIP MIAMI, FL 33156 TITLE ☐ Change X Addition 🔽 Delete TITLE SD NAME ROCKER, GERRI M Moreles, Mayra 1051 Collins Avenue #1 NAME STREET ADDRESS 16920 SW 78TH PLACE STREET ADDRESS PALMETTO BAY, FL 33157 CITY-ST-7IP CITY-ST-ZIP Mitmu Beach, FL 33139 TITLE ☐ Change Addition | Delete TITLE Fardo, Gigi 6600 SW67th Street BALBIN, MICHAEL NAME NAME STREET ADDRESS 8346 DUNDEE TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI LAKES, FL 33016 CITY-ST-ZIP SOLHA MIAMI, FL 33143 TITLE Delete TITLE ☐ Change ☐ Addition MINDINGALL, TISHRIA NAME NAME 1071 NW 87TH STREET STREET ADDRESS STREET ADDRESS MIAMI, FL 33150 CITY-ST-7tP CITY-ST-ZIP Delete Change TITLE TD TITLE ☐ Addition Ulsh, Sherry 9173 Froude Avenue WISH, SHERRY NAME NAME 9173 FROUDLE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SURFSIDE, FL 33154 CITY-ST-ZIP Surfside, FL 33154 ☐ Delete TITLE Pδ ☐ Change Addition TITLE STIERHEIM Judith 6720 SW 124th Street NAME NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

MIAMLIFL 33156

FILED