

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23672

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: JACKSON MEMORIAL FOUNDATION, INC.

**Current Principal Place of Business:**

901 NW 17ST  
SUITE G  
MIAMI, FL 33136 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 NW 17ST  
SUITE G  
MIAMI, FL 33136 US

**New Mailing Address:**

FEI Number: 65-0077727      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RODRIGUEZ, ROLANDO, D  
901 NW 17 ST  
SUITE G  
MIAMI, FL 33136 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: S ( ) Delete  
Name: MCENANY, PATRICK  
Address: 1252 ANASTASIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: VC ( ) Delete  
Name: DIAMOND, ALAN T  
Address: 1221 BRICKELL AVE.  
City-St-Zip: MIAMI, FL 33131

Title: T ( ) Delete  
Name: HOLTZ, ABEL  
Address: 420 LICOLN ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: RODRIGUEZ, ROLANDO D  
Address: 2726 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: C ( ) Delete  
Name: FERRELL, MILTON  
Address: 201 S. BISCAYNE BLVD. 34 FLOOR  
City-St-Zip: MIAMI, FL 33131

**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: ( ) 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: ROLANDO D. RODRIGUEZ

MM

04/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date