

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

08-02-2005 90030 024 ***61.21
N47722

DOCUMENT # N47722		
1. Entity Name INTERNATIONAL WOMEN'S FORUM, INC.		

FILED

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SECRETARY OF STATE
TALLAHASSEE, FL 32399
50059127A



Principal Place of Business 1601 S. MIAMI AVENUE MIAMI, FL 33129 US	Mailing Address 1601 S. MIAMI AVENUE MIAMI, FL 33129 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07132005 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0329792	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PARKS MCCABE, ARVA M 1601 S. MIAMI AVENUE MIAMI, FL 33129		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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PARKS MCCABE, ARVA M 1601 S. MIAMI AVENUE MIAMI, FL 33129 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SIGARS-MALINA, JANA 5200 BLUE LAGOON DRIVE, STE 600 MIAMI, FL 331262022 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ELSER, MARSHA 44 W. FLAGLER STREET, STE 2100 MIAMI, FL 33130 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WEINTRAUB, THERESA V 100 SE 2ND AVENUE, STE 2300 MIAMI, FL 33130 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Weintraub, Teresa V-F ☒ Change ☐ Addition 200 S. Biscayne Blvd. Ste. 3050 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BASS, HILARIE 1221 BRICKELL AVENUE MIAMI, FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAXTER, JO 6855 RED ROAD, STE 600 CORAL GABLES, FL 33143 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Arva M. Parks 7/28/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #