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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 27 PM 4:16

DOCUMENT # N17946 (7)  
1. Corporation Name  
ROTARY CLUB OF MIAMI, INC.

Principal Place of Business Mailing Address  
330 BISCAYNE BLV.  
STE 805  
MIAMI FL 33132  
US

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                                |                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 3. Date Incorporated or Qualified<br>11/25/1986                                                                                                                | 3a. Date of Last Report<br>01/25/1994 |
| 4. FEI Number<br>59-0428463                                                                                                                                    | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                      | \$8.75 Additional Fee Required        |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                             | \$5.00 May Be Added to Fees           |
| 7. Nonprofit with IRS 501(c)(3)<br>Tax Exempt Status <input type="checkbox"/>                                                                                  | \$68.75 Supplemental Fee Not Required |
| 8. This corporation has liability for intangible tax under S. 199.032,<br>Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                       |

|                                                                                                     |                                                                                          |
|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country | 2a. Mailing Address<br>25 Suite, Apt. #, etc.<br>26 City & State<br>27 Zip<br>28 Country |
|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIVINS, ART III  
330 BISCAYNE BLVD.  
~~ROOM 1005~~  
MIAMI FL 33132

STE 805

|         |                                                       |    |         |       |             |
|---------|-------------------------------------------------------|----|---------|-------|-------------|
| 81 Name | 82 Street Address (P.O. Box Number is Not Acceptable) | 83 | 84 City | 85 FL | 86 Zip Code |
|---------|-------------------------------------------------------|----|---------|-------|-------------|

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

| 12. OFFICERS AND DIRECTORS |                               | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                              |
|----------------------------|-------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE                      | D                             | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | DECKER, ROBERT                | 1.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 127 N.E. 27TH ST.             | 1.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | MIAMI FL                      | 1.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | <del>DE</del>                 | 2.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | KASSEWITZ, RUTH B.            | 2.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 1138 ADUANA AVE.              | 2.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | CORAL GABLES FL               | 2.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | TD                            | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | WIGGINS, JAMES R.             | 3.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 14500 S.W. 84 AVE.            | 3.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | MIAMI FL                      | 3.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | SD                            | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | BIVINS III, ARTHUR            | 4.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 13721 S.W. 84 ST.             | 4.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | MIAMI FL                      | 4.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | <del>PHILPITT, MARSHALL</del> | 5.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <del>1607 MANTUA</del>        | 5.2 NAME                                              |                                                                              |
| STREET ADDRESS             | <del>CORAL GABLES FL</del>    | 5.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                |                               | 5.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | <del>WILLIAMS, PAUL T.</del>  | 6.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <del>1400 AGUA AVE</del>      | 6.2 NAME                                              |                                                                              |
| STREET ADDRESS             | <del>CORAL GABLES FL</del>    | 6.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                |                               | 6.4 CITY-ST-ZIP                                       |                                                                              |

\*SEE ATTACHED LIST  
OF ALL DIRECTORS

VD  
EASTMAN, CHARLES  
195 SW 15 RD #405  
MIAMI FL 33129

RD  
GALPERIN, ARNOLD  
5840 SW 116 ST  
MIAMI FL 33156

14. I do hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated in this annual report or supplemental annual 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, partner, proprietor or the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13, as applicable, or in an attachment with an address.

SIGNATURE: *Arthur C. Bivins III* ARTHUR C. BIVINS III

JAN 19, 1995 1-305-373-1588

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

Daytime Phone #

2

BOARD OF DIRECTORS  
ROTARY CLUB OF MIAMI, FL INC  
1994-1995

ARNOLD GALPERIN, PRES  
5840 SW 116 ST  
MIAMI FL 33156

REV CHUCK EASTMAN, VP  
UNITED PROTESTANT APPEAL  
195 SW 15 RD #405  
MIAMI FL 33129

RICHARD DAVIS  
BAILEY HUNT et al  
501 BRICKELL KEY DR #300  
MIAMI FL 33131

ARTHUR C. BIVINS III, SECTY  
ROTARY CLUB OF MIAMI  
330 BISCAYNE BLVD #805  
MIAMI FL 33132

ROBERT DECKER  
MILLER MACHINERY  
127 NE 27 ST  
MIAMI FL 33137

LINDA LUBITZ  
WOOLF & LUBITZ  
9130 S DADELAND BLVD #1600  
MIAMI FL 33156

RUTH KASSEWITZ  
1136 ADUANA AVE  
CORAL GABLES, FL 33146

CY HORNSBY  
HORNSBY SACHER et al  
1110 BRICKELL AVE PH  
MIAMI FL 33131

STEPHANIE LAYTON  
MIAMI DADE C.C.  
300 NE 2 AVE  
MIAMI FL 33132

ROGER TOLEDANO  
DADE AVIATION CNSLTS  
4200 NW 36 ST #200  
MIAMI FL 33122

JOHN HARRISON  
HARRISON CONSTRUCTION  
1000 NW 54 ST  
MIAMI FL 33127

ROGER LANGER  
LANGER ELECTRIC  
7389 NW 8 ST  
MIAMI FL 33126

ROGER BARRETO  
3025 NW 4 TER  
MIAMI FL 33125

MARCY ULLOM  
UNIV OF MIAMI  
PO BOX 248005  
CORAL GABLES FL 33124

ROGER WINGERTER  
WINGERTER LABS  
4820 NW 99 CT  
N MIAMI FL 33178

GARTH PARKER  
SOMAY PRODUCTS  
4301 NW 35 AVE  
MIAMI FL 33142

JIM WIGGINS, TREAS  
GERSON PRESTON  
666 71 ST  
MIAMI BEACH FL 33141

GENE GUTIERREZ  
MURRAY PRESS  
145 NW 71 ST  
MIAMI FL 33129