

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000006197 1. Entity Name THE MICHAEL AND LOUISA VON CLEMM FOUNDATION, INC.	
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Principal Place of Business 200 S BISCAYNE BLVD #5300 MIAMI, FL 33131-2339	Mailing Address 200 S BISCAYNE BLVD #5300 MIAMI, FL 33131-2339
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07062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0541059	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JOHNSON, ETHAN W 200 S BISCAYNE BLVD #5300 % MORGAN LEWIS & BOCKIUS MIAMI, FL 33131-2339	DO NOT WRITE IN THIS SPACE
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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.

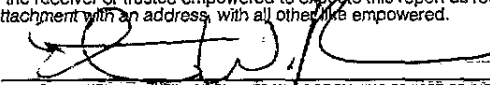
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
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Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VON CLEMM, LOUISA 58 BEDFORD GARDENS LONDON W8 7EM ENGLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VON CLEMM, STEFANIE C NO 2 DRAYSON MEWS LONDON W8 4LY ENGLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, ETHAN W 630 CAMPANA AVE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIGHTER, JAMES V 58 WINTER ST BOSTON, MA 02108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISELIN, CHARLOTTE 11B SHEFFIELD TERR LONDON, EN W8
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCN. RIGHTER, BREWSTER A 760 CHICKEN VALLEY RD LOCUST VALLEY, NY 11560

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	July 6, 2005 Date	305 415 3394 Daytime Phone #
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