2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 12, 2005 08:00 AM Secretary of State

DOCUMENT # 714329 1. Entity Name EASTER SEALS MIAMI-DADE, INC.								. S	ecretary o	f State
Principal Place of Business Mailing Address 1475 N W 14TH AVENUE 1475 N W 14TH AVENUE MIAMI, FL 33125-1616 MIAMI, FL 33125-1616								I WER KINEK AWA AKIN A	ELY BIRKY BIRKY BIRKY BYRKY BYRK	8)\\ # \$ @ \$ \ \$# \$
2. Principal	Place of Business	3. Mail	3. Mailing Address							
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			······································	01042005	Chg-NP	CR2E037 (10/03)		
City & Sta	ite .	City	City & State			4. FEI Number 59-072			pplied For ot Applicable	
Zip	Zip Cou		<u> </u>	Zip		untry	5. Certificate of		\$8.75 Ad Fee Require	
6. Name and Address of Current Registered Agent						Name	7. Name and	Address of New	Registered Agent	
BORNSTE 1475 NW MIAMI, FL		Street Address			P.O. Box Number is Not Acceptable)					
	_ ** 	<u> </u>	W.B.		-,	City			FL Zip Coo	
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 X Dees Commoter Joan L. BornsTein Ph.D. President/CEO 7/5/05 Signature, typed or pirited name of registered agent and title if applicable. (NOTE. Registered Agent signature required, when reinstating) DATE										
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Camp Trust Fund Cor						ion.	\$5.00 May Be Added to Fees	Flo	Make check payable t rida Department of S	tate
TITLE	CD	OFFICERS AND D	RECTORS	Delete	11.		ADDITIONS/CHA	ANGES TO OFFICE	RS AND DIRECTORS IN	I 10 ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	ROSSMAN, S' 5340 BANYAN MIAMI, FL 33		NAI STF		1	U00000372418 07/12/05-80006-013 70.00				
YITLE	SD DANGE DAN			☐ Delete					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	BIANCO, PAU 601 BRICKELL MIAMI, FL 33	KEY DR. #404	, , <u>, , , , , , , , , , , , , , , , , </u>	ert.		ET ADDRESS -ST-ZIP		ر ادفاعی	4	ļ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PECKINS, DAY 3050 BISCAYN MIAMI, FL 331	IE BLVD	-	☐ Delate		ET AODRESS -ST-ZIP	-		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HABIB, STEVE 1 GROVE ISLE MIAMI, FL 331	E DR APT 303		☐ Delete					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STANLEY, TA 1475 N W 14 A MIAMI, FL 331	re Ve		□ Delete	amu	ı	<u> </u>	· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GALLAGHER, 4320 SANTA M CORAL GABLI	ROBERT E JR MARIA		☐ Delete	TITLE NAME STREE	l l			☐ Chaлge	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: X OCCUPATION OF SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #										