## 2003 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT#714329**

Entity Name: EASTER SEALS MIAMI-DADE, INC.

FILED Feb 19, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1475 N W 14TH AVENUE MIAMI, FL 331251616 **Current Mailing Address: New Mailing Address:** 1475 N W 14TH AVENUE MIAMI, FL 331251616 FEI Number: 59-0722783 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BORNSTEIN, JOAN L PHD 1475 NW 14TH AVE MIAMI, FL 33125 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROSSMAN, STEPHEN F Name: Name: Address: 5340 BANYAN DRIVE Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: SILVERMAN, DR BARRY J MD Name: Address: 19553 NE 37TH AVE Address: City-St-Zip: N MIAMI BEACH, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition PECKINS, DAVIDM Name: Name: 3050 BISCAYNE BLVD Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition HABIB, STEVEN Name: Name: 1 GROVE ISLE DR APT 303 Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: () Delete Title: SD (X) Change ( ) Addition SESSIONS, MRS ELLEN STANLEY, TATE Name: Name: 1230 MENDAVIA 1475 N W 14 AVE Address: Address: CORAL GABLES, FL 33146 City-St-Zip: City-St-Zip: MIAMI, FL 33125 Title: ( ) Delete Title: () Change () Addition GALLAGHER, ROBERT E JR Name: Name: Address: 4320 SANTA MARIA Address: CORAL GABLES, FL 33146 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHEN ROSSMAN CD 02/19/2003