

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90194 044 ****61.25

DOCUMENT # 715906

1. Entity Name
ROTARY FOUNDATION OF MIAMI, FLORIDA, INC.



40004001

Principal Place of Business
**269 GIRALDA AVE
STE 302
MIAMI, FL 33134 US**

Mailing Address
**269 GIRALDA AVE
STE 302
MIAMI, FL 33134 US**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01052007 Chg-NP CR2E037 (12/06)

4. FEI Number
23-7091199

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MORGAN, NANCY C
269 GIRALDA AVE 302
CORAL GABLES, FL 33134**

7. Name and Address of New Registered Agent

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

Signature, typed or printed 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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **DE ALMEIDA, JAIR**
STREET ADDRESS **9737 NW 41 ST. #490**
CITY-ST-ZIP **MIAMI, FL 33178**

TITLE **D** ☒ Delete
NAME **DAVIS, RICHARD**
STREET ADDRESS **5531 RIVIERA DR**
CITY-ST-ZIP **CORAL GABLES, FL 33146**

TITLE **D** ☒ Delete
NAME **GOLDEN, RANDY**
STREET ADDRESS **5015 LONDON WALK**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE **D** ☐ Delete
NAME **WIGGINS, JAMES**
STREET ADDRESS **14500 SW 84 AVE**
CITY-ST-ZIP **MIAMI, FL 33158**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☐ Addition
NAME **BECKHAM, WILLIAM**
STREET ADDRESS **12500 VIRTUES ST**
CITY-ST-ZIP **CORAL GABLES FL 33156**

TITLE **D** ☐ Change ☐ Addition
NAME **BLAKE, THEODORE**
STREET ADDRESS **172 NE 15 ST**
CITY-ST-ZIP **MIAMI FL 33132**

TITLE **D** ☐ Change ☐ Addition
NAME **TOKINSON, RICHARD**
STREET ADDRESS **5900 SW 135 ST**
CITY-ST-ZIP **PINE CREST FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **Richard D. Tokinson (RICHARD TOKINSON)** January 11, 2007 (305) 663-2304
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone