


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # 736045 1. Entity Name MIAMI DADELAND ROTARY FOUNDATION, INC.	
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Principal Place of Business 9520 SW 118TH COURT MIAMI, FL 33186 US	Mailing Address 9520 SW 118TH COURT MIAMI, FL 33186 US
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DO NOT WRITE IN THIS SPACE



05092005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1710788	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNS, LOUIS G
9485 SUNSET DR
A195
MIAMI, FL 33173-3297

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature requires when reconstituting)

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees


111111110366102
 05/11/05-80030-012 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JOHNS, LOUIS G 9485 SUNSET DR A 195 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LIEBERMAN, RON 10625 SW 100 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D POZEN, IRA 14243 SW 84TH ST MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JOHNS, JACQUELYN 9520 SW 118TH CT MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CENEY, DONNA 4201 TOLEDO ST CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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:  9 May 2005 3052748581
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #