


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 740444 (5) 1. Corporation Name MANFRED MEMORIAL FOUNDATION, INC.					
Principal Place of Business 17300 S.W. 177 AVENUE MIAMI FL 33187			Mailing Address 18530 CARIBBEAN BLVD MIAMI FL 33157-7262 US		
2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 10/14/1977	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		3a. Date of Last Report 02/02/1996	
City & State 23		City & State 28		4. FEI Number 59-2089153	
Zip 24		Country 25		Applied For <input type="checkbox"/> Not Applicable	
Zip 29		Country 30		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent PRISCILLA STEVENS 18530 CARIBBEAN BLVD MIAMI FL 33157		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS					
1.1 TITLE PDGILBERT DAVID S. <input type="checkbox"/> DELETE					
1.2 NAME DAVID S. GILBERT					
1.3 STREET ADDRESS 15550 N.W. 11th Ave.					
1.4 CITY-ST-ZIP MIAMI FL 33169					
2.1 TITLE VD <input type="checkbox"/> DELETE					
2.2 NAME KELSEY, GEORGE W. JR.					
2.3 STREET ADDRESS 14641 S.W. 66 AVE.					
2.4 CITY-ST-ZIP MIAMI FL					
3.1 TITLE SD <input type="checkbox"/> DELETE					
3.2 NAME GOMPERS, GAYE DR.					
3.3 STREET ADDRESS 11309 SW 167 TERRACE					
3.4 CITY-ST-ZIP MIAMI FL					
4.1 TITLE TD <input type="checkbox"/> DELETE					
4.2 NAME STEVENS, PRISCILLA					
4.3 STREET ADDRESS 18530 CARIBBEAN BLVD.					
4.4 CITY-ST-ZIP MIAMI FL					
5.1 TITLE D <input type="checkbox"/> DELETE					
5.2 NAME KORNER, ROBERT D					
5.3 STREET ADDRESS 3211 PONCE DE LEON					
5.4 CITY-ST-ZIP CORAL GABLES FL					
6.1 TITLE D <input type="checkbox"/> DELETE					
6.2 NAME COOK, POLLY L					
6.3 STREET ADDRESS 9000 SW 62ND COURT					
6.4 CITY-ST-ZIP MIAMI FL					



CR2E037 (9/96)