

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741214

FILED
Mar 29, 2007
Secretary of State

Entity Name: PATRONS OF THE MUSEUM OF SCIENCE, INC.

Current Principal Place of Business:

530 TIBIDABO AVENUE
CORAL GABLES, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

530 TIBIDABO AVENUE
CORAL GABLES, FL 33143 US

New Mailing Address:

FEI Number: 59-1802789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURAD, BARBARA E
530 TIBIDABO AVENUE
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: LEVELL, MARIE
Address: 5990 S. W. 135 TERRACE
City-St-Zip: PINECREST, FL 33156

Title: VP () Delete
Name: BAKER, RITA
Address: 7007 SW 148 TERRACE
City-St-Zip: PALMETTO BAY, FL 33158

Title: T () Delete
Name: MURAD, BARBARA
Address: 530 TIBIDABO AVENUE
City-St-Zip: CORAL GABLES, FL 33143

Title: S () Delete
Name: KAYE-MARTIN, SUE
Address: 3017 BLAINE STREET
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCALLISTER, ANN
Address: 19411 S. W. 308 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: VP (X) Change () Addition
Name: KAYE-MARTIN, SUE
Address: 3017 BLAINE STREET
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: STRANO, LORENE
Address: 25450 S. W. 193 AVENUE
City-St-Zip: HOMESTEAD, FL 33031

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: BARBARA MURAD

T

03/29/2007

Electronic Signature of Signing Officer or Director

Date