## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#749422**

FILED Apr 28, 2006 Secretary of State

Entity Name: THE MIAMI FORUM, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2665 S. BAYSHORE DR. SUITE 800 C/O LINDA E. BAKER MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 2665 S. BAYSHORE DR, SUITE 800 C/O LINDA E. BAKER MIAMI, FL 33133 FEI Number: 59-1969769 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKER, LINDA E 2665 S. BAYSHORE DR., SUITE 800 MIAMI, FL 33133 US 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: () Delete () Change () Addition SCHNEIDER, MARY MARGARET Name: Name: 4120 RAYNOLDS AVENUE Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: V/D () Delete Title: () Change () Addition CARTER, SUSAN M Name: Name: Address: 9329 SW 151 AVENUE Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: V/D () Delete Title: () Change () Addition RANDALL, SUSAN L Name: Name: 12301 SW 62ND AVENUE Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: ( ) Delete Title: V/D Title: () Change () Addition SILVER, LEDA Name: Name: Address: 9704 SW 133 CT Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: V/D () Delete Title: () Change () Addition Name: FIX, GAIL Name: 800 WEST AVENUE, SUITE 601 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: () Delete Title: () Change () Addition BAKER, LINDA E Name: Name: Address: 2665 S. BAYSHORE DR., SUITE 800 Address: MIAMI, FL 33133 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 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: LINDA E. BAKER T/D 04/28/2006