

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762509

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE MIAMI SHORES MAYOR'S COMMUNITY TASK FORCE, INC.

Current Principal Place of Business:

9617 PARK DR
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 531512
MIAMI SHORES, FL 33153

New Mailing Address:

FEI Number: 59-2210193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORN, MICHAEL C
502 NE 106 ST
MIAMI SHORES, FL 33138 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: DC () Delete
Name: BURCH, ALICE P
Address: 1440 NE 101 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: DT () Delete
Name: DORN, MICHAEL C
Address: 502 NE 106 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: DS () Delete
Name: RAIA, CARMEN
Address: 452 GRAND CONCOURSE
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVT (X) Change () Addition
Name: DORN, MICHAEL C
Address: 502 NE 106 ST
City-St-Zip: MIAMI SHORES, FL 33138

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL C. DORN

DVT

04/30/2009

Electronic Signature of Signing Officer or Director

Date