## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000000424

FILED Jun 01, 2005 Secretary of State

Entity Name: MIAMI-DADE PUBLIC LIBRARY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 101 WEST FLAGLER STREET MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 101 WEST FLAGLER STREET MIAMI, FL 33130 FEI Number: 01-0808831 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARRIOLA VELEZ, MARIA C 35 ALMERIA AVE CORAL GABLES, FL 33134 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: MARIA C. VELEZ Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete YOUNG, MARY Name: Name: IBM CORP ONE COLUMBUS CTR Address: Address: City-St-Zip: MIAMI, FL 33134 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: WINICK, PAULINE Name: Address: 11200 SW 8 ST BLDG MARC #540 Address: City-St-Zip: MIAMI, FL 33199 City-St-Zip: Title: () Delete Title: () Change () Addition DEVRIES ASHLEY, DIANE Name: Name: 100 SE 2 STREET Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition WYLLIE, CAROL Name: Name: 6843 MAIN STREET Address: Address: City-St-Zip: HIALEAH, FL 33014 City-St-Zip: Title: () Delete Title: () Change () Addition TURKEL, LEONARD Name: Name: 2871 OAK AVENUE Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: () Delete Title: () Change () Addition BROOKS, LAINEY Name: Name: Address: MAIN LIBRARY 101 W FLAGLER STREET Address: MIAMI, FL 33130 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 Section 119.07(3)(i), 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: LAINEY BROOKS T 06/01/2005