

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002855

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: MIAMI EDISON CLASS OF 1954, INC.

## Current Principal Place of Business:

934 N.E. 91 TERRACE  
MIAMI SHORE, FL 33138

## New Principal Place of Business:

934 N.E. 91 TERRACE  
MIAMI SHORES, FL 33138

## Current Mailing Address:

934 N.E. 91 TERRACE  
MIAMI SHORE, FL 33138

## New Mailing Address:

934 N.E. 91 TERRACE  
MIAMI SHORES, FL 33138

FEI Number: 34-1989378

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOKESBERRY, JOHN  
934 N.E. 91 TERRACE  
MIAMI SHORE, FL 33138 US

## Name and Address of New Registered Agent:

STOKESBERRY, JOHN  
934 N.E. 91 TERRACE  
MIAMI SHORES, FL 33138 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:

04/29/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STOKESBERRY, JOHN  
Address: 934 N.E. 91 TERRACE  
City-St-Zip: MIAMI SHORE, FL 33138

Title: D ( ) Delete  
Name: BLOOD, ROBERT  
Address: 29308 PRINCEVILLE DRIVE  
City-St-Zip: SAN ANTONIO, FL 33576

Title: D ( ) Delete  
Name: CAMPOS, ELIZABETH W  
Address: 2542 LAKE ELLEN CIRCLE  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: DARDEN, MARSHALL  
Address: 3680 SAINT GAUDENS DRIVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: WESTBROOK, PAUL  
Address: 10000 US 98 NORTH, #843  
City-St-Zip: LAKELAND, FL 33809

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JOHN STOKESBERRY

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date