

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011034

FILED
Jan 13, 2006
Secretary of State

Entity Name: MIZNER PARK CULTURAL ARTS ASSOCIATION, INC.

Current Principal Place of Business:

433 PLAZA REAL - STE 339
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

433 PLAZA REAL - STE 339
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 42-1662121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIEMON, CHARLES L ESQ
433 PLAZA REAL - STE 339
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

ROTHENBERG, MARK A ESQ
433 PLAZA REAL - STE 339
BOCA RATON, FL 33432 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: MARK A. ROTHENBERG

01/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BLOMGREN, KATE
Address: % 110 NORTH WACHER DRIVE
City-St-Zip: CHICAGO, IL 60606

Title: VPSD () Delete
Name: LENBERG, LUANE
Address: 433 PLAZA REAL, SUITE 339
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SIEMON, CHARLES ESQ
Address: 433 PLAZA REAL - STE 339
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SIEMON, CHARLES
Address: 433 PLAZA REAL STE. 339
City-St-Zip: BOCA RATON, FL 33432

Title: VP (X) Change () Addition
Name: TRAVASOS, ALBERT
Address: 433 PLAZA REAL, SUITE 339
City-St-Zip: BOCA RATON, FL 33432

Title: SEC (X) Change () Addition
Name: KAMINSKI, JULIE
Address: 433 PLAZA REAL - STE 339
City-St-Zip: BOCA RATON, FL 33432

Title: TRES () Change (X) Addition
Name: KAMINSKI, JULIE
Address: 433 PLAZA REAL STE 339
City-St-Zip: BOCA RATON, FL 33432

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: CHARLES L. SIEMON

PD

01/13/2006

Electronic Signature of Signing Officer or Director

Date