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Mar 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N12510 (6)

1. Corporation Name

LOUIS WOLFSON II MEDIA HISTORY CENTER, INC.

Principal Place of Business

Mailing Address

MIAMI DADE PUBLIC LIBRARY
101 WEST FLAGLER STREET
MIAMI FL 33130

MIAMI DADE PUBLIC LIBRARY
101 WEST FLAGLER STREET
MIAMI FL 33130-1504



3. Date Incorporated or Qualified
12/12/1985

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

4. FEI Number

59-2666628

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME
P PELTON, MARGARET
STREET ADDRESS
300 NE 2ND AVE
CITY- ST- ZIP
MIAMI FL

1.2 NAME ☒ DELETE

T TRAYLOR, HORACE J
STREET ADDRESS
300 N.E. 2ND AVE.
CITY- ST- ZIP
MIAMI FL 33132

1.3 NAME ☐ DELETE

D BROWN, WILLIAM
STREET ADDRESS
UNIVERSITY OF MIAMI
CITY- ST- ZIP
MIAMI FL

1.4 NAME ☐ DELETE

D WOLFSON, LYNN
STREET ADDRESS
5050 NORTH BAY ROAD
CITY- ST- ZIP
MIAMI BEACH FL

1.5 NAME ☐ DELETE

D ABRELL, JOE
STREET ADDRESS
536 HARDEE ROAD
CITY- ST- ZIP
CORAL GABLES FL

1.6 NAME ☒ DELETE

D BLANK, TONY
STREET ADDRESS
9350 SOUTH DIXIE HWY
CITY- ST- ZIP
SU 900 MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

Vice President
Margaret Pelton
101 West Flagler Street
Miami, Florida 33130

2.1 TITLE ☒ Change ☐ Addition

Errol Rosen
Treasurer
300 NE 2nd Ave
Miami, FL 33132

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☒ Addition

PRESIDENT
Paul George
300 NE 2nd Ave.
Miami, FL 33132

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dr. Paul George 3/20/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

305-237-3723

Daytime Phone # 0028746

CR2E037 (9/96)