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NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 SEP 26 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N16139 (0)

1. Corporation Name

THE MIAMI-NORLAND ROTARY FOUNDATION, INC.



Principal Place of Business

Mailing Address

P.O. BOX 680-174
MIAMI FL 33168

P.O. BOX 680-174
MIAMI FL 33168-0174

3. Date Incorporated or Qualified
07/30/1986

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BACKERS, TYRONE K.
11380 NW 27 AVENUE
SUITE 1382
MIAMI FL 33167

81 Name

EDWARD J. GORHARDT

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

11077 Biscayne Blvd #301

83

84

City

MIAMI

FL

85 Zip Code
33161

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

Edward J. Gorhardt, CPA

9/18/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BACKERS, TYRONE K.
STREET ADDRESS 11380 NORTHWEST 27 AVENUE, SUITE 1382
CITY-ST-ZIP MIAMI FL 33167

TITLE P
NAME BERGER, WILLIAM B
STREET ADDRESS 17050 NE 19 AVE
CITY-ST-ZIP N MIAMI BEACH FL 33162

TITLE D
NAME KEMP, STUART
STREET ADDRESS 15476 NW 77TH CT. #348
CITY-ST-ZIP MIAMI LAKES FL 33014

TITLE T
NAME MORRISON, LINCOLN
STREET ADDRESS 6073 NW 167 ST #C7
CITY-ST-ZIP MIAMI FL 33015

TITLE S
NAME BURKE, ELBE
STREET ADDRESS 6073 NW 167 ST #C7
CITY-ST-ZIP MIAMI FL 33015

TITLE D
NAME MOLINA, LUIS
STREET ADDRESS 115 NW 167TH ST
CITY-ST-ZIP N MIAMI BEACH FL 33169

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
700002309097--3
-10/01/97--01035--003
*****61.25 *****61.25

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

CR2E037 (9/96)