

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2005
Secretary of State**

DOCUMENT# N17865

Entity Name: MIZNER FOUNDATION OF BOYNTON BEACH, INC.

Current Principal Place of Business:

1010 S FED HY
P.O BOX 823
BOYNTON BEACH, FL 33425 US

New Principal Place of Business:

Current Mailing Address:

1010 S FED HY
P.O BOX 823
BOYNTON BEACH, FL 33425 US

New Mailing Address:

FEI Number: 59-2806950 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, VONCILE M DR.
1747 BANYAN CREEK COURT
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: TRAUGER, DORIAN
Address: 717 GOLF COURT
City-St-Zip: DELRAY BEACH, FL 33445

Title: S/D () Delete
Name: SMITH, VONCILE M DR.
Address: 1747 BANYAN CREEK COURT
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: WEAVER, CURTIS
Address: 4384 CARYOTA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: EDWARDS, BRIAN K
Address: 629 NE 9TH AVE
City-St-Zip: BOYNTON BCH, FL 33435

Title: D () Delete
Name: SIMON, ERNEST G.,
Address: P.O.BOX 2020, NA
City-St-Zip: DELRAY BEACH, FL

Title: T/D () Delete
Name: MCMAHONMORIARITY, JAMES
Address: 629 SW 21 CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33462

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:

Title: D (X) Change () Addition
Name: OYER, HARVEY E D
Address: 511 EAST OCEAN AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

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: VONCILE M. SMITH

S/D

04/28/2005

Electronic Signature of Signing Officer or Director

Date