

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002155

FILED  
Feb 02, 2005  
Secretary of State

**Entity Name:** NEW WORLD SYMPHONY SUPPORTING FOUNDATION, INC.

**Current Principal Place of Business:**

541 LINCOLN ROAD  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

541 LINCOLN ROAD  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

**FEI Number:** 65-0666813

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HERRING, HOWARD  
541 LINCOLN ROAD  
MIAMI BEACH, FL 33139 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: PD ( ) Delete  
Name: ARISON, MICKY  
Address: 3655 NW 87 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete  
Name: TILSON THOMAS, MICHAEL  
Address: 541 LINCOLN ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DSV ( ) Delete  
Name: WEINSTEIN, ANDREW H  
Address: 701 BRICKELL AVENUE, SUITE 3000  
City-St-Zip: MIAMI, FL 33131

Title: DT ( ) Delete  
Name: SCHNEIDER, SHELDON D  
Address: 4082 BATTERSEA ROAD  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: FRANK, HOWARD  
Address: 3655 NW 87 AVE  
City-St-Zip: MIAMI, FL 33178

**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: SHELDON SCHNEIDER

DT

02/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date