

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005266

FILED  
Mar 27, 2007  
Secretary of State

**Entity Name:** MIAMI HIGH FOOTBALL HALL OF FAME, INC.

**Current Principal Place of Business:**

6042 SW 85 AVE  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6042 SW 85 AVE  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 65-0780216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTHEWS, CHARLES H  
6042 SW 85 AVE  
MIAMI, FL 33143 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: VPD ( ) Delete  
Name: BRIDIS, TED  
Address: 9785 SW 145TH STREET  
City-St-Zip: MIAMI, FL 33176

Title: STD ( ) Delete  
Name: MATTHEWS, CHARLES  
Address: 6042 S.W. 85TH AVENUE  
City-St-Zip: MIAMI, FL 44143

Title: PD ( ) Delete  
Name: MARIOTTO, GENE  
Address: 7925 SW 69TH TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: MERO, LARRY  
Address: 9866 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

**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:

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 H. MATTHEWS

STD

03/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date