2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# N99000003565

Entity Name: FLORIDA CITY, HOMESTEAD, GOLDCOAST HISTORIC RAILROAD FOUNDATION, INC.

Current Principal Place of Business:

1390 S. DIXIE HWY
SUITE 1203
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

1390 S. DIXIE HWY.
SUITE 1203
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 65-0935901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLLE, DENNIS J
2525 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FL 33134 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: CD ( ) Delete
Name: HARPER, ALLEN C
Address: 1390 S. DIXIE HWY., #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: STD ( ) Delete
Name: MURPHY, LORETTA A
Address: 1390 S. DIXIE HWY., #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: JACKSON, JEFFREY D
Address: 479 MAIN
City-St-Zip: DURANGO, CO 81301

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:

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: CAROLINA PEROZO ASST 04/26/2006

Electronic Signature of Signing Officer or Director — Date