## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUI 1. Corporation	MENT # 70216	69 (4)			
	ER HOLLYWOOD JAYCEE				
Principal Place	e of Business	Mailing Address			
ATTN: PRES	IDENT	ATTN: PRESIDENT			
P. O. BOX 1551		P. O. BOX 1551			
HOLLYWOOD	FL 33022-1551	HOLLYWOOD FL 33022-1	1551	3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal D	Inon of Business	On Malling Address		03/17/1961 4. FEI Number	10/25/1995
2. Principal Place of Business		2a. Mailing Address 26		59-1356850	Applied For  Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Hequired
23	•	28 28		Election Campaign Financing     Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25 9. Name and Address of Curro	29 ent Registered Agent	]30]	Florida Statutes  10. Name and Address of New F	Yes No
GRONDVOLD, JOHN    B1   Name Kevin Biederman					
2930 HOLLYWOOD BLVD.			63	2930 Holly	wood BIVD.
HOLLY	/OOD FL 33024				;
			<b>B4</b> City	Holly wood	FL 85 Zip Code 33020
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statuter	s, the above-named o	orporation sobmits this statement for the pu	
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 617.0509. Florida Statutes.					
SIGNATURE SIGNATURE (S) Denvi (NOTE Registered Agent signature required when reinstating)  DATE  ONTE					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME	COB DEVEUAX, RODNEY	DEFELE	1.1 TITLE 1.2 NAME	V. President	Change    Addition
STREET ADDRESS	2219 NE 13 ST		1.3 STREET ADDRESS		[33]
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CiTY-ST-ZIP		22
TITLE	VP	DELETE	21 TITLE	President Biederman, Kevi	Change
NAME CTOCCT ADDRESS	BIODERMAN, KEVIN		2.2 NAME	Biederman, Kevi	n
STREET ADDRESS CITY-ST-ZIP	3040 N 73 TR. HOLLYWOOD FL		2 3 STREET ADDRESS 2. 4 City - St - Zip		
TITLE	P	☐ DELETE	3.1 TITLE	COB	Change
NAME	GRONDVOLD, JOHN		3 2 NAME		
STREET ADDRESS	2214 FILMORE ST		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	HOLLYWOOD FL D	<b>№</b> DELETE	3.4. CITY - ST-ZIP 4.1 TITLE	<b>5</b>	☐ Change ► Addition
NAME	JACOBS, SCOTT	<b>4</b>	4. 2 NAME	Matt Dopelick 3725 S. Ocean D	c. Apt 409
STREET ADDRESS	2930 HOLLYWOOD BLVD.		4.3 STREET ADDRESS		r. Apriloi
CITY-ST-ZIP	HOLYWOOD FL	Marie et e	4.4 CITY - ST - ZIP	Hollywood Fl	33019
TITLE NAME	t Topler, glen	<b>∑</b> D€LETE	5 1 TITLE 5 2 NAME	Robert ANZ	Change Addition
STREET ADDRESS	6570 SW 47 CT		5 3 STREET ADDRESS	4165 SW 24+45TI	reet.
CHTY-ST-ZIP	DAVIE FL		5 4 CITY-ST-ZIP	F+ Landerdule	£1 33317
TITLE	D	DELETE	6 1 TITLE	P ~	Change Addition
NAME STREET ADDRESS	ENIQI, MILO		62 NAME	Tracey Kiysby	L. Apt 12
CITY-ST-ZIP	2930 HOLLYWOOD BLVD. HOLLYWOOD FL		6.3 STREET ADDRESS 6.4 CHY-ST-ZIP	This bierce	33020
14 Ldo hereb	y certify that the information supplied	with this filing is voluntarily furnis	hed and does not our	alify for the exemption stated in Section 110	07/21/k) Florido Statutos I further
certify that the information indicated on this angual 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.					
BD D-L					
SIGNATURE:  SIGNATURE:  SIGNATURE AND TYPEGOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Cale  Desture Proce #					
	SOURTONE AND TYPEUS	NULL TOTAL OF MAME OF SIGNING OFFICER	ON DIRECTOR	Dale	Daytime Phone #