

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715888

**FILED  
Jul 06, 2004  
Secretary of State**

**Entity Name:** LOCAL 725 HOLDING CORPORATION, INC.

**Current Principal Place of Business:**

13185 N.W. 45TH AVENUE  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

13185 N.W. 45TH AVENUE  
OPA LOCKA, FL 33054

**New Mailing Address:**

**FEI Number:** 59-0665289      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CONLEY, JAMES H  
13185 NW 45TH AVENUE  
OPA LOCKA, FL 33054      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: PTD      ( ) Delete  
Name: CONLEY, JAMES H  
Address: 13185 N.W. 45TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

Title: VD      ( ) Delete  
Name: SUTTON, RAY B  
Address: 13185 N.W. 45TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

Title: SD      ( ) Delete  
Name: RYDER, MICHAEL H  
Address: 13185 N.W. 45TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

Title: STD      ( ) Delete  
Name: SMITH, ROY V JR  
Address: 13185 N.W. 45TH AVE.  
City-St-Zip: OPA LOCKA, FL 33054

Title: D      ( ) Delete  
Name: SCOTT, KENNETH E JR  
Address: 13185 NW 45TH AVE.  
City-St-Zip: OPA LOCKA, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD      (X) Change ( ) Addition  
Name: JOHNSON, SAMUEL L  
Address: 13185 N.W. 45TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

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: JAMES H. CONLEY

PTD

07/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date