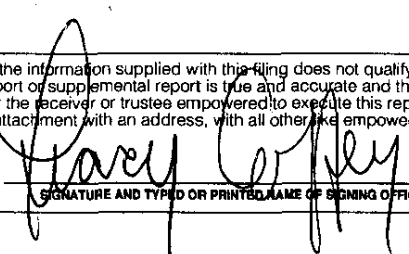


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90176 027 ****61.25

DOCUMENT # N96000004400 1. Entity Name SOUTH DIXIE ANTIQUE ROW ASSOCIATION, INC.					
Principal Place of Business 3700 SOUTH DIXIE #6 WEST PALM BEACH, FL 33405 US			Mailing Address 3700 SOUTH DIXIE #6 WEST PALM BEACH, FL 33405 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
COFFEY, TRACY 3700 S DIXIE HWY #6 WEST PALM BEACH, FL 33405			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	REYES, ALLAN		NAME		
STREET ADDRESS	3632 S. DIXIE HWY		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33405		CITY-ST-ZIP		
TITLE	D ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	NEITZ, ELIZABETH		NAME		
STREET ADDRESS	3717 S DIXIE HWY		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33405		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	FRENCH, RON		NAME		
STREET ADDRESS	3800 SO DIXIE HWY		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33405		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☒ Addition	
NAME			NAME	Tracy Coffey, President	
STREET ADDRESS			STREET ADDRESS	3700 S. Dixie Hwy #6	
CITY-ST-ZIP			CITY-ST-ZIP	W. Palm Beach FL 33405	
TITLE	☐ Delete		TITLE	☐ Change ☒ Addition	
NAME			NAME	Alan Sol	
STREET ADDRESS			STREET ADDRESS	3707 S. Dixie Hwy.	
CITY-ST-ZIP			CITY-ST-ZIP	W. Palm Beach, FL 33405	
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/28/04 57d 832-0803 Date Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

14020724



04282004 Chg-NP CR2E037 (10/03)

4. FEI Number **65-0682424** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**