

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
95 JUL 14 AM 11:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 295705

(8)

1. Corporation Name

THE JOCKEY CLUB, INC.

Principal Place of Business

11111 BISCAYNE BLVD
NORTH MIAMI FL 33181-3404

Mailing Address

11111 BISCAYNE BLVD
NORTH MIAMI FL 33181-3404

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/10/1965

3a. Date of Last Report

06/13/1994

4. FEI Number

59-1196603

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

SARDINIA, SAM
11111 BISCAYNE BLVD
NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

Richard Greene

82 Street Address (P.O. Box Number is Not Acceptable)

International Building, Suite 905
2455 E. Sunrise Blvd.

83

84 City

Sunrise

FL

85 Zip Code

33304

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Inger Petersen, Asst. Secy

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renouncing)

DATE

8/30/95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

C
HERMAN, JACK
11111 BISCAYNE BLVD
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
SARDINIA, SAMUEL A
11111 BISCAYNE BLVD
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
DIFRISCO, PEGGY
11111 BISCAYNE BLVD
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President

☒ Change ☐ Addition

1.2 NAME

Henry Walther

1.3 STREET ADDRESS

11111 Biscayne Blvd.

1.4 CITY - ST - ZIP

Miami, FL 33160

2.1 TITLE

Secretary

☒ Change ☐ Addition

2.2 NAME

Jerry Foster

2.3 STREET ADDRESS

11111 Biscayne Blvd

2.4 CITY - ST - ZIP

Miami, FL 33161

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Inger Petersen, Asst. Secy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-893-3344