

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # 733868

1. Entity Name
**YOUNG MEN'S PROGRESSIVE CLUB OF DELRAY
BEACH NO. 2, INC.**



Principal Place of Business
**105 N.W. 11TH AVENUE
DELRAY BEACH, FL 33444 US**

Mailing Address
**105 N.W. 11TH AVENUE
DELRAY BEACH, FL 33444 US**



03092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**STAGHN, ALFRED
26 SW 5TH AVE
DELRAY BEACH, FL 33444**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ODOM, EDDIE JR
3905 LAWSON BOULEVARD
DELRAY BEACH, FL 33445**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
RANDOLPH, DAVID E
105 N.W. 11TH AVENUE
DELRAY BEACH, FL 33444**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
GHOLSTON, JEROME
1438 SW 2ND STREET
DELRAY BEACH, FL 33444**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
STRAGHN, ALFRED
26 S.W. 5TH AVE
DELRAY BEACH, FL 33444**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000673036
03/29/07-80012-021 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/14/2007

Date

278-7148

Daytime Phone #