


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # 735997	
1. Entity Name	
SOUTH FLORIDA THEATRE ORGAN SOCIETY, INC.	

Principal Place of Business	Mailing Address
C/O GEORGE W. GERHART 1700 N.W. NORTH RIVER DRIVE #504 MIAMI FL 33125-2353	C/O GEORGE W. GERHART 1700 N.W. NORTH RIVER DRIVE #504 MIAMI FL 33125-2353

2. Principal Place of Business	3. Mailing Address
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number		Applied For
59-1781372		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
GERHART, GEORGE 1700 NW N. RIVER DR #504 MIAMI FL 33125		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$81.25
Due By May 1, 2005

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	PD	TITLE	
NAME	VASQUEZ-CRUZ, ALEX	NAME	
STREET ADDRESS	265 REINETTE DR	STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33166	CITY - ST - ZIP	
TITLE	VPD	TITLE	
NAME	REISSNER, FREDERICK D	NAME	
STREET ADDRESS	2840 S. OAKLAND FORREST DR #2402	STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33309	CITY - ST - ZIP	
TITLE	TD	TITLE	
NAME	GERHART, GEORGE W	NAME	
STREET ADDRESS	1700 N.W. NORTH RIVER DRIVE #504	STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33125-2353	CITY - ST - ZIP	
TITLE	SD	TITLE	
NAME	COOK, KERRY	NAME	
STREET ADDRESS	479 NE 30TH ST #908	STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33137	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
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)(f), 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:  **GEORGE W. GERHART, Treas.3-28-05 305/301 6678**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #