

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738606

FILED
Jul 04, 2005
Secretary of State

Entity Name: NO WHERE BOTTLE AND SOCIAL CLUB, INC.

Current Principal Place of Business:

5011 W. HILLSBORO BLVD.
COCONUT CREEK, FL 330734306

New Principal Place of Business:

Current Mailing Address:

5011 W. HILLSBORO BLVD.
COCONUT CREEK, FL 330734306

New Mailing Address:

FEI Number: 59-2001242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LAWRENCE, JAMES
5011 W HILLSBORO BLVD
COCONUT CREEK, FL 33073 US

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: PVD () Delete
Name: LAWRENCE, JAMES,
Address: 5011 W HILLSBORO BLVD.
City-St-Zip: POMPANO BCH., FL

Title: TD () Delete
Name: LENARD, THOMAS,
Address: 5011 W HILLSBORO BLVD.
City-St-Zip: POMPANO BCH., FL

Title: SD () Delete
Name: BROWNE, JACK,
Address: 5011 W HILLSBORO BLVD
City-St-Zip: POMPANO BCH., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: LENARD, PENELOPE,
Address: 5011 W HILLSBORO BLVD
City-St-Zip: POMPANO BCH., FL

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: LENARD, THOMAS

TD

07/04/2005

Electronic Signature of Signing Officer or Director

Date