2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State
05-08-2006 90277 035 ****61.25

DOCUMENT # 766307

1. Entity Name

HOT JAZZ & ALLIGATOR GUMBO SOCIETY, INC.

Principal Place of Business	Mailing Address
C/O MARCIE REID 3654 NE 19 AVE FT. LAUDERDALE FL 33308 US	C/O MARCIE REID 3654 NE 19 AVE FT. LAUDERDALE FL 33308 US

1st MOORE CR2E037 (10/05)

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

4. FEI Number 59-2272269 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REID, MARCIE 3654 NE 19 AVE FT LAUDERDALE FL 33308	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 Marcella P. Reid MARCIE REID EXEC. SECY 4-28-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STARACE, STEVE 7764 CLOVERFIELD CIRCLE BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STARACE, STEVE 7764 CLOVERFIELD CIRCLE BOCA RATON, FL 33433	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TENAGLIA, FRANK 515 VIA GENOVA DEERFIELD BEACH FL 33441	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HEMPHILL, MARGIE 1537 E. HILLSBORO BLVD. #441 DEERFIELD BEACH, 33441	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VELUZZI, BILL 3294 NW 104 AVE CORAL SPRINGS FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUBBELL, FRANK 13309 SW 24 ST. MIRAMAR, FL 33027	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HULTMAN, JOHN 900 SW 54 AVE MARGATE FL 33068	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D McGOWAN, ROB 10247 CROSSWIND RD BOCA RATON, FL 33498	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDREWS, VIC 800 SW 50 TERR MARGATE FL 33068	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDREWS, VIC 1781 SW 23RD WAY DEERFIELD BEACH, FL 33442	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARADISE, ARMAND 112 NW 52ND CT. POMPANO BEACH, FL 33064	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: [illegible] 4-26-06 954-771-2801