

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H20906

FILED  
Feb 15, 2005  
Secretary of State

Entity Name: JACK KLEIN ASSOCIATES, INC.

## Current Principal Place of Business:

6835-37 VISTA PARKWAY NORTH  
WEST PALM BEACH, FL 33411 US

## New Principal Place of Business:

6903 VISTA PARKWAY NORTH  
SUITES 8-9  
WEST PALM BEACH, FL 33411 US

## Current Mailing Address:

6837 VISTA PKWY N  
W PALM BCH, FL 33411 US

## New Mailing Address:

6903 VISTA PARKWAY NORTH  
SUITES 8-9  
W PALM BCH, FL 33411 US

FEI Number: 59-2471845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLEIN, JOHN C., JR.  
6837 VISTA PKWY N  
W PALM BCH, FL 33411 US

## Name and Address of New Registered Agent:

KLEIN, JOHN C., JR.  
6903 VISTA PARKWAY NORTH  
SUITES 8-9  
W PALM BCH, FL 33411 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: JOHN C. KLEIN, JR. - PRESIDENT

02/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: KLEIN, JOHN C JR.  
Address: 5512 WHITESANDS COVE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: CMV ( ) Delete  
Name: KLEIN, JACK C  
Address: 8631 GRASSY ISLE TRAIL  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: SD ( ) Delete  
Name: SPILLANE, JOHN P  
Address: 12788 W FOREST HILL BLVD, STE 2005  
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: VD (X) Delete  
Name: KLEIN, RUTH A  
Address: 8631 GRASSY ISLE TRAIL  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: V ( ) Delete  
Name: GARVIN, SUEN W.P.  
Address: 13194-B QUIET WOODS ROADS  
City-St-Zip: WEST PALM BEACH, FL 33414 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C. KLEIN, JR.

DPT

02/15/2005

Electronic Signature of Signing Officer or Director

Date