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

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # N01000005050 1. Entity Name 04-25-2005 90228 020 ****61.25 THE GREATER FLORIDA JAZZ & SWING CLUB II. INC. Principal Place of Business Mailing Address 4870 SW 103 AVE COOPER CITY FX 33328 BOX 480101 DELRAY BEACH FL 33448-0101 **586322000** 2. Principal Place of Business のいりm Pic His ATS School Mailing Address Bux 61/888 Suite, Apt. #, etc. Suite, Apt. #, etc. LYONS AND GLASES RA 1st MOORE CR2E037 (10/04) 4. FEI Number Applied For 65-0962701 Not Applicable \$8.75 Additional-5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ED BURKE BURKE, ED 4871 S.W. 103 AVENUE COOPER CITY FL 33328 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. (NOTE. Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change Addition TIERNEY, RITA NAME NAME 727 N FEDERAL HWY D-207 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP CITY-ST-ZIP EP BURGE Ghange Addition 729 S. Federal Hay D. 207 Impun Beach Fe 35062 Delete TITLE BURKE, ED NAME NAME 4871 SW 103 AVENUE STREET ADDRESS STREET ADDRESS COOPER CITY FL 33328 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE NAME GREENSPAN, PAUL L NAME 3150 N:E: 7-COURT-STREET ADDRESS STREET ADDRESS **AVENTURA FL 33180** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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)(i), 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.

Bruku

SIGNATURE:

FILED

3-12-65