

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

**FILED**  
**Feb 02, 2005 8:00 am**  
**Secretary of State**

02-02-2005 90039 043 \*\*\*\*70.00

**DOCUMENT # N01019**

1. Entity Name

THE MEN'S CLUB OF POINCIANA, INC.



Principal Place of Business

MEN'S CLUB OF POINCIANA  
3536 POINCIANA DR  
LAKE WORTH FL 33467-9937  
US

Mailing Address

MEN'S CLUB OF POINCIANA  
3536 POINCIANA DR  
LAKE WORTH FL 33467-9937  
US

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

59-2334439

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

WEINTRAUB, STANLEY J  
3286 ARCARA WAY, #102  
LAKE WORTH FL 33467

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

*Stanley J. Weintraub* - STANLEY J. WEINTRAUB

1/27/05

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, 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

TITLE	PP	<input checked="" type="checkbox"/> Delete
NAME	FALK, OWEN	
STREET ADDRESS	3326 ARCARA WAY, #413	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SILVER, LARRY	
STREET ADDRESS	6850 10TH AVENUE N, #101	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	DT	<input type="checkbox"/> Delete
NAME	WEINTRAUB, STANLEY J	
STREET ADDRESS	3286 ARCARA WAY, #102	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	FSD	<input type="checkbox"/> Delete
NAME	VOGEL, HERB	
STREET ADDRESS	6698 10TH AVE N. #307	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	P	<input type="checkbox"/> Delete
NAME	BRICKNER, SOL	
STREET ADDRESS	3871 POINCIANA DRIVE, #601	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MARKVIN ROSENBERG	
STREET ADDRESS	3810 VIA POINCIANA - #408	
CITY-ST-ZIP	LAKE WORTH, FL 33467	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	OFFICE MANAGER / IS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BERNIE BLUESTEIN	
STREET ADDRESS	3836 VIA POINCIANA - #506	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE: *Stanley J. Weintraub* - STANLEY J. WEINTRAUB 1/27/05 561-966-7866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #