## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008621

Entity Name: CLUB CULTURAL DOMINICANO, INC.

FILED Mar 14, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5537 COVE CIRCLE NAPLES, FL 34119 **Current Mailing Address: New Mailing Address:** 5537 COVE CIRCLE NAPLES, FL 34119 FEI Number: 20-0311633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREZ, COSME E 5263 GOLDEN GATE PARKWAY SUITE B NAPLES, FL 34116 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BUTTLER, JANET Name: Name: 6366 HUNTINGTON LAKES CIRCLE, APT. 204 Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: BURGOS, RAMON Name: Address: 3220 BERMUDA ISLE CIRCLE, APT. 1139 Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: () Delete Title: () Change () Addition ABREU, JOSE Name: Name: 7295 MILL POND CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: SEC ( ) Delete Title: () Change () Addition Name: TEJADA, MILDRE Name: 5537 COVE CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: ( ) Delete Title: () Change () Addition IZQUIERDO, JOSE Name: Name: 5497 COVE CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: () Delete Title: () Change () Addition VELIZ. LAUTARO Name: Name: Address: 5201 30TH AVENUE SW Address: NAPLES, FL 34116 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANET BUTTLER P 03/14/2004