

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002189

FILED  
Feb 21, 2006  
Secretary of State

Entity Name: THE TREVOR DEE FOUNDATION, INC.

**Current Principal Place of Business:**

250 NORTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

200 EAST 33RD STREET  
SUITE 19E  
NEW YORK, NY 10016

**Current Mailing Address:**

250 NORTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020

**New Mailing Address:**

200 EAST 33RD STREET  
SUITE 19E  
NEW YORK, NY 10016

FEI Number: 20-0889077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRYN, USHER ESQ.  
2999 N.E. 191 STREET  
PENTHOUSE SIX  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

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:**

Title: P, T ( ) Delete  
Name: DEE, DAVID  
Address: 3937 BARBADOS DRIVE  
City-St-Zip: COOPER CITY, FL 33026

Title: VP ( ) Delete  
Name: DEE, SHARON  
Address: 3937 BARBADOS DRIVE  
City-St-Zip: COOPER CITY, FL 33026

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P, T (X) Change ( ) Addition  
Name: DEE, DAVID  
Address: 200 EAST 33RD STREET, 19E  
City-St-Zip: NEW YORK, NY 10016

Title: VP (X) Change ( ) Addition  
Name: DEE, SHARON  
Address: 200 EAST 33RD STREET, 19E  
City-St-Zip: NEW YORK, NY 10016

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID DEE

P.T

02/21/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date