2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004102

FILED Feb 03, 2005 Secretary of State

Entity Name: THE BELLAGGIO CULTURE AND SOCIAL CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 6525 BELLAGGIO LAKES BLVD LAKE WORTH, FL 33467 **Current Mailing Address: New Mailing Address:** 6525 BELLAGGIO LAKES BLVD LAKE WORTH, FL 33467 FEI Number: 01-0809681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERSCHKOWITZ, RENEE 9656 SAN VITTORE ST LAKE WORTH, FL 33467 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: (X) Change () Addition () Delete SPREECHMAN, JOANNE GOLDSTEIN, DIANE Name: Name: 9724 SAN VITTORE ST Address: 6819 RIENZO STREET Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467 Title: () Delete Title: (X) Change () Addition GIORDANO, RONNIE Name: GIORDANO, RONNIE Name: Address: 9592 SAN VITTORE ST Address: 9592 SAN VITTORE ST City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467 Title: () Delete Title: () Change () Addition BERGER, JOAN Name: Name: 9735 SAN VITTORE ST Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: GROSS, SHEILA Name: Address: 65 34 MURANO Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition HERSCHKOWITZ, RENEE Name: Name: 9656 SAN VITTORE ST Address: Address: City-St-Zip: LAKE WORTH, FL 33467 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: RENEE HERSCHKOWITZ T 02/03/2005