

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *109650* (5)

1. Entity Name

First Class Club, Inc.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUN 30 AM 11:13

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1257 NW 31st Ave

1248 NW 18th Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Shopping Center

Home

City & State

City & State

Lauderdale Fla

Lauderdale 33311

4. FEI Number

592562705

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

33311

Broward

33311

Broward

5. Certificate of Status Desired



\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Albert H. May Jr.

Street Address (P.O. Box Number is Not Acceptable)

609 SW 1st St.

City

Dania Beach

FL

Zip Code

33004

**DO NOT WRITE
IN THIS SPACE**

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

Albert H. May Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

6/25/05

DATE

FEE IS \$61.25
Initial or Amended UBR

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
NAME
STREET ADDRESS
CITY-ST-ZIP
*AD 1248 NW 18th Court
FL Lauderdale Fla 33311
Mc Swain Hardy*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*100056350491
06/20/05--01063--007 **70.00*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*S/D 609 SW 1st St. Dania, Fla 33004
Ivey Albert*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*D/D 1248 NW 18th Court
FL Lauderdale Fla 33311
Hardy Wilma*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mc Swain Hardy

6/17/05 *CP240-0369*
(954) 524-2637

CR2E037B (12/02)