2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13013

Entity Name: SOUTH FLORIDA PRESS CLUB, INC.

FILED Oct 21, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
555 N.E. 15TH ST. 25-K MIAMI, FL 331328405				8415 S.W 107 AVE. 114W MIAMI, FL 33173 US			
Current Mailing Address:				New Mailing Address:			
555 N.E. 15TH ST. 25-K MIAMI, FL 331328405				8414 SW 107 AVE. 114W MIAMI, FL 33173 US			
FEI Number:	59-2636119	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired (X	()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ROSENTHAL, ALAN, ESQ. 200 S. BISCAYNE BLVD., 20TH FLOOR MIAMI, FL 33131A US				ALPERS, ANDREW J 8415 SW 107 AVE. 114W MIAMI, FL 33173 US			
The above in the State		ubmits this statement for the pu	irpose o	f changing it	ts registered of	ffice or registered agent, or l	both,
SIGNATURE: ANDREW J. ALPERS				10/21/2004			
	Electroni	c Signature of Registered Ager	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () SULLIVAN, JOY 3910 UTOPIA CT MIAMI, FL 3313	Ī		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () NEUMAN, SUSA 555 N.E. 15TH S MIAMI, FL	*		Title: Name: Address: City-St-Zip:	D (X) DANIEL FITZGE 6251 SW 36 ST MIAMI, FL 3315	REET	
Title: Name: Address: City-St-Zip:	D () DIAMOND, HIND 671 N.E. 195 ST MIAMI, FL			Title: Name: Address: City-St-Zip:	D (X) DIAMOND, HINE 400 LESLIE DR BOCA RATON, I	IVE #520	
Title: Name: Address: City-St-Zip:	PD () LEVITT, RON 141 SEVILLA AV CORAL GABLES			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	ALPERS, ANDÝ	Delete H AVENUE, B114 3		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SD () GOODWIN, DAV P.O. BOX 54-66 MIAMI, FL 3315	31		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: ANDREW J. ALPERS D 10/21/2004