2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003459

FILED Jan 20, 2006 Secretary of State

Entity Nar	me: MOSAIC	OUTDOOR CLUB OF SOUTH	FLORIDA, INC.	•	
Current Principal Place of Business:			New Principal Place	of Business:	
P.O. BOX 8 BOCA RA	810362 TON, FL 3348	10362			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX 8 BOCA RA	810362 TON, FL 3348	10362			
FEI Number:	65-0441690	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:					
DRONSKY 262 SOUT MIAMI, FL	H COCONUT	LANE			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () GLASSMAN, LA 651 NW 89TH A PLANTATION, F	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () JAFFE, ROBER 7453 CHABLIS BOCA RATON,	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () THOMPSON, AI 1080 NW 85TH PLANTATION, F		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 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: ROBERT A. JAFFE SD 01/20/2006