## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000377

Entity Name: EXCALIBUR CLASSIC, INC.

FILED Jul 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O RAYMOND E. IMPERIAL 1515 NORTH FED HWY SUITE 219 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

C/O RAYMOND E. IMPERIAL 1515 NORTH FED HWY SUITE 219 BOCA RATON, FL 33432

FEI Number: 65-0807139 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

IMPERIAL, RAYMOND E

1515 N FEDERAL HWY SUITE 203

BOCA RATON, FL 33432 US

IMPERIAL, RAYMOND E

1515 N FEDERAL HWY SUITE 219

BOCA RATON, FL 33432 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: 07/13/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: IMPERIAL, RAYMOND E Name: IMPERIAL, RAYMOND E Address: 1515 N. FEDERAL HWY, SUITE 219 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

(X) Change ( ) Addition Title: VD ( ) Delete Title: PROCACCI, PAT PROCACCI, ROSE Name: Name: Address: 5901 NW 23RD, AVE. Address: 5901 NW 23RD, AVE City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

Title: STD () Delete Title: STD (X) Change () Addition Name: APPLEBAUM, ALLEN Name: APPELBAUM, ALAN

Address: 8195 NW 47TH DR. Address: 101 NORTH FEDERAL HWY, SUITE 600

City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip: BOCA RATON, FL 33432

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: RAYMOND E. IMPERIAL PD 07/13/2005