



# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90116 013 \*\*\*\*61.25

<b>DOCUMENT # N98000000377</b> 1. Entity Name <b>EXCALIBUR CLASSIC, INC.</b>					
Principal Place of Business <b>C/O RAYMOND E. IMPERIAL 1515 NORTH FED HWY SUITE 219 BOCA RATON, FL 33432</b>			Mailing Address <b>C/O RAYMOND E. IMPERIAL 1515 NORTH FED HWY SUITE 219 BOCA RATON, FL 33432</b>		
2. Principal Place of Business <b>1120 Holland Drive</b> Suite, Apt. #, etc. <b>Suite 17</b> City & State <b>Boca Raton, FL</b> Zip <b>33487</b>		3. Mailing Address <b>1120 Holland Drive</b> Suite, Apt. #, etc. <b>Suite 17</b> City & State <b>Boca Raton, FL</b> Zip <b>33487</b>			
Country <b>USA</b>		Country <b>USA</b>		01122006 Chg-NP CR2E037 (11/05)	
4. FEI Number <b>65-0807139</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>IMPERIAL, RAYMOND E 1515 N FEDERAL HWY SUITE 219 BOCA RATON, FL 33432</b>			7. Name and Address of New Registered Agent Name <b>Raymond Imperial</b> Street Address (P.O. Box Number is Not Acceptable) <b>1120 Holland Drive</b> <b>Suite 17</b> City <b>Boca Raton, FL</b> <b>FL</b> Zip Code <b>33487</b>		
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 <u><i>Raymond Imperial</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IMPERIAL, RAYMOND E 1515 N. FEDERAL HWY, SUITE 219 BOCA RATON, FL 33432	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1120 Holland Drive, #17 Boca Raton, FL 33487</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PROCACCI, ROSE 5901 NW 23RD. AVE. BOCA RATON, FL 33496	<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD APPELBAUM, ALAN 101 NORTH FEDERAL HWY, SUITE 600 BOCA RATON, FL 33432	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Raymond Imperial</i></u> <span style="float: right;">1-13-06</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					