


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90080 033 ****61.25

DOCUMENT # N98000003069		
1. Entity Name FINANCE NETWORK CLUB INC.		
Principal Place of Business 450 E LAS OLAS BLVD STE 950 FORT LAUDERDALE, FL 33301	Mailing Address 450 E LAS OLAS BLVD STE 950 FORT LAUDERDALE, FL 33301 33334	

50018520



02092005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0839634	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DRATH, RICHARD CPA 450 E LAS OLAS BLVD 4201 NE 12th TERRACE STE 950 FT LAUDERDALE, FL 33301-33334	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DRATH, RICHARD 450 E LAS OLAS BLVD STE 950 4201 NE 12th TERRACE FORT LAUDERDALE, FL 33301-33334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BMD DRATH, MINDY L 1512 LANTANA COURT WESTON, FL 33326
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BMD GREENBERG, AL 17292 HAMPTON BLVD BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  RICHARD DRATH Date 2-15-05 Daytime Phone # 954-563-4433