

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N98000003619 1. Entity Name THE SWING AND JAZZ PRESERVATION SOCIETY OF FLORIDA, INC.			
Principal Place of Business 7808 CORAL LAKE DRIVE DELRAY BEACH, FL 33446		Mailing Address 7808 CORAL LAKE DR. DELRAY BEACH, FL 33446	
			
01102006 No Chg-NP CR2E037 (11/05)			
DO NOT WRITE IN THIS SPACE		4. FEI Number 83-0648885	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZERAH, RENE 7808 CORAL LAKE DRIVE DELRAY BEACH, FL 33446		DO NOT WRITE IN THIS SPACE	
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 Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent Signature required when re-electing) U00000385004 01/12/06-90037-019 61.25	
Filing Fee is \$61.25 Due by May 1, 2006		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	D MILES, JACK 7761 SILVERLAKE DR. DELRAY BEACH, FL 33446		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIEREL, AL 17290 KING HURST DR. DELRAY BEACH, FL 33446		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAZOR, MORT 15462 FIORENZA CIRCLE DELRAY BEACH, FL 33446		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZERAH, RENE 7808 CORAL LAKE DR. DELRAY BEACH, FL 33446		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALLEN, PAUL 1100 S. OCEAN BLVD., APT. 82 DELRAY BEACH, FL 33483		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KESTENBAUM, MARTIN 10983 HIGHLAND CIRCLE BOCA RATON, FL 33428		
DO NOT WRITE IN THIS SPACE			
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 without address, with all other like empowered.			
SIGNATURE: <i>René Zerah</i>		1/10/2006	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	