

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004966

FILED  
Apr 26, 2009  
Secretary of State

Entity Name: GEORGE E. MILLER COUNCIL NO. 695 - U.C.T., INC.

## Current Principal Place of Business:

4423 LAKE AVE  
WEST PALM BEACH, FL 33405

## New Principal Place of Business:

6308 GRANT STREET  
HOLLYWOOD, FL 33024

## Current Mailing Address:

4423 LAKE AVE  
WEST PALM BEACH, FL 33405

## New Mailing Address:

6308 GRANT STREET  
HOLLYWOOD, FL 33024

FEI Number: 59-6137445

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARISH, JOS. D.  
FARISH, FARISH & ROMANI  
361 BANYAN BLVD  
WEST PALM BEACH, FL 33402 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SHAFER, LAWRENCE  
Address: 6308 GRANT ST.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: VD ( ) Delete  
Name: DREYER, GEORGE  
Address: 8330 NW 11TH ST  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: STD ( ) Delete  
Name: MARKSBERRY, RAY  
Address: 4423 LAKE AVE  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DREYER, GEORGE  
Address: 1620 LAUDERDALE W DR  
City-St-Zip: PLANTATION, FL 33322

Title: VD (X) Change ( ) Addition  
Name: SHEARS, AL  
Address: 1651 SW 127 AVE, APT 201, FAL. A  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: STD (X) Change ( ) Addition  
Name: SHAFER, LAWRENCE  
Address: 6308 GRANT ST.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Change (X) Addition  
Name: CURTISS, DON  
Address: 90 PIEDMONT B #90B  
City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify 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: LAWRENCE E. SHAFER

STD

04/26/2009

Electronic Signature of Signing Officer or Director

Date