

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001222

FILED  
Feb 09, 2005  
Secretary of State

**Entity Name:** JEWELRY INDUSTRY DISTRIBUTORS ASSOCIATION, INC.

**Current Principal Place of Business:**

701 ENTERPRISE DRIVE  
HARRISON, OH 45030 US

**New Principal Place of Business:**

**Current Mailing Address:**

701 ENTERPRISE DRIVE  
HARRISON, OH 45030 US

**New Mailing Address:**

**FEI Number:** 52-6057313

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIVESAY, SR., HENRY A  
JIDA  
456 W. COLUMBUS DR.  
TAMPA, FL 33602 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: T ( ) Delete  
Name: FOSTER, RICK  
Address: 2550 CIVIC CENTER DRIVE  
City-St-Zip: CINCINNATI, OH 45231 US

Title: P ( ) Delete  
Name: GOLDBERG, LARRY  
Address: 245 23RD ST  
City-St-Zip: TOLEDO, OH 43624 US

Title: 1VP ( ) Delete  
Name: BILL, NAGLE  
Address: 5 SOUTH WABASH AV # 105  
City-St-Zip: CHICAGO, IL 60603

Title: 2VP ( ) Delete  
Name: COBRIN, HARVEY  
Address: 1029 BEAVER HALL HILL # 410  
City-St-Zip: MONTREAL, PQ H2Z 1R9 CA

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS J PACK

FN D

02/09/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date