

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007229

FILED
Jan 13, 2004
Secretary of State

Entity Name: SOUTH FLORIDA SPEARFISHING CLUB, INC.

Current Principal Place of Business:

C/O STEPHEN PICARDI
12717 WEST SUNRISE BLVD #251
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

C/O STEPHEN PICARDI
12717 WEST SUNRISE BLVD #251
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 65-1051152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICARDI, STEPHEN
12717 WEST SUNRISE BLVD #251
SUNRISE, FL 33323 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: D () Delete
Name: DAYE, SHERI
Address: 2515 NW 29TH DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: CAMPBELL, THOMAS
Address: 1067 MARBLE WAY
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SCHOEPP, STEVE
Address: 1198 SW 12TH RD.
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: BRUCE, PAUL
Address: 525 N. OCEAN BLVD.#921
City-St-Zip: POMPANO BEACH, FL 33341

Title: D () Delete
Name: MOORE, JERRY
Address: 1421 SE 13TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33341

Title: D () Delete
Name: ALBRIGHT, LOUISE
Address: 8597 VIA GIULLA
City-St-Zip: BOCA RATON, FL 33496

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:

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

Title: D (X) Change () Addition
Name: JEMISON, MAURICE
Address: 20795 RAINDANCE LANE
City-St-Zip: BOCA RATON, FL 33428

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: MAURICE JEMISON

D

01/13/2004

Electronic Signature of Signing Officer or Director

Date