2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000058419

Address: City-St-Zip: FILED Feb 16, 2006 Secretary of State

Entity Nan	ne: NIGHTCI	LUB MAN	NAGEMENT, II	VC.				
Current Principal Place of Business:					New Principal Place of Business:			
2900 4TH STREET NORTH A101								
ST. PETER	RSBURG, FL	33704	US					
Current Ma	ailing Addres	ss:			New Maili	ng Addre	ss:	
A101	STREET NOR							
ST. PETER	RSBURG, FL	33704	US					
FEI Number:	20-2855334	FEI Nu	mber Applied Fo	or() FEINu	mber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
KENNEY, JERRY L 2900 4TH STREET NORTH A101				GORDON, GREGG M GEN MGR 2900 4TH STREET NORTH A101				
ST. PETERSBURG, FL 33704 US					ST. PETERSBURG, FL 33704 US			
The above in the State		submits [.]	this statement	for the purpose o	of changing it	ts register	ed office or registered agent, or both,	
SIGNATURE: GREGG M. GORDON					02/16/2006			
Electronic Signature of Registered Agent					Date			
Election Can	npaign Financin	g Trust Fu	and Contribution	().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	BURGESS, PA	LE BOULE	VARD NE, UNIT 1 3704 US		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	KENNEY, JER	EET NORT	TH, SUITE: A101 16704 US		Title: Name: Address: City-St-Zip:	1001 EDE	(X) Change()Addition S, PATRICIA P N ISLE BOULEVARD NE, UNIT 1 RSBURG, FL 33704 US	
Title: Name:) Delete			Title: Name:	S/TR BURGESS	() Change (X) Addition S. PATRICIA P	

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1001 EDEN ISLE BOULEVARD NE, UNIT 1

ST. PETERSBURG, FL 33704 US

SIGNATURE: PATRICIA P. BURGESS Ρ 02/16/2006