

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000073716

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: LINTON JOG ASSOCIATES II, INC.

## Current Principal Place of Business:

4400 PGA BLVD.  
SUITE 900  
PALM BEACH GARDENS, FL 33410

## Current Mailing Address:

4400 PGA BLVD.  
SUITE 900  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

8409 NORTH MILITARY TRAIL  
SUITE 123  
PALM BEACH GARDENS, FL 33410

## New Mailing Address:

8409 NORTH MILITARY TRAIL  
SUITE 123  
PALM BEACH GARDENS, FL 33410

FEI Number: 65-0859445

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHERRY, RICHARD G  
4400 PGA BLVD. SUITE 900  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

CHERRY, RICHARD G  
8409 NORTH MILITARY TRAIL  
SUITE 123  
PALM BEACH GARDENS, FL 33410 US

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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILMERING, N K  
Address: PO BOX 2011  
City-St-Zip: WEST PALM BEACH, FL 33402

Title: VD ( ) Delete  
Name: HOECKER, JOHN J  
Address: 13090 COASTAL CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33410

Title: TD ( ) Delete  
Name: HOECKER, GARY  
Address: 214 S GRAND AVE W  
City-St-Zip: SPRINGFIELD, IL 62704

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD G. CHERRY

VP

04/26/2005

Electronic Signature of Signing Officer or Director

Date