

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000104005

1. Entity Name
GREATER FLORIDA JAZZ & SWING CLUB, INC.

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90485 039 ***150.00

Principal Place of Business
7564-A LEXINGTON CLUB BLVD
DELRAY BEACH FL 33446

Mailing Address
7564-A LEXINGTON CLUB BLVD
DELRAY BEACH FL 33446

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

P.O. B480101

Suite, Apt. #, etc.

West Delray Beach

City & State

City & State

FL 33448-0101

4. FEI Number

65-0962701

Applied For

Not Applicable

Zip

Country

Zip

Country

Palm Beach

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STERN, KURT
7564-A LEXINGTON CLUB BLVD
DELRAY BEACH FL 33446

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME PSTD
STREET ADDRESS STERN, KURT
CITY-ST-ZIP 7564-A LEXINGTON CLUB BLVD
DELRAY BEACH FL 33446 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME Music Director
STREET ADDRESS Ed Burke
CITY-ST-ZIP 4870 SW 103rd Ave. ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME Cooper City, FL 33328 ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: KURT STERN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-12-01

561-4493681

CR2E034 (10/00)