

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744217

Entity Name: FRENCHMAN'S CREEK, INC.

FILED
Mar 17, 2004
Secretary of State

Current Principal Place of Business:

13495 TOURNAMENT DR.
PALM BCH GDNS, FL 33410

New Principal Place of Business:

Current Mailing Address:

13495 TOURNAMENT DR.
PALM BCH GDNS, FL 33410

New Mailing Address:

FEI Number: 65-0023229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRACKEN, JOHN B
505 S. FLAGLER DR.LVD.
SUITE 1100
WEST PALM BEACH, FL 334013475 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: PD () Delete
Name: SHERMAN, LAWRENCE
Address: 13893 RIVOLI DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: FVPD () Delete
Name: HABUSH, ROBERT
Address: 3040 MIRO DRIVE SOUTH
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SVPD () Delete
Name: WISEMAN, IRVING
Address: 13141 BURGUNDY DRIVE SOUTH
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD () Delete
Name: PETRICOFF, MARK
Address: 3278 DEGAS DRIVE EAST
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD () Delete
Name: SIEGEL, DENISE
Address: 13767 LE BATEAU LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: SD (X) Change () Addition
Name: ZIMMERMAN, ED
Address: 13652 RIVOLI DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: LAWRENCE SHERMAN

PD

03/17/2004

Electronic Signature of Signing Officer or Director

Date