

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000001882

**Entity Name:** NWF BORICUAS AUSENTES INC.

**Current Principal Place of Business:**

49 JONQUIL AVENUE NW  
FT WALTON BEACH, FL 32548

**Current Mailing Address:**

NWF BORICUAS AUSENTES INC.  
PO BOX 523  
MARY ESTHER, FL 32569 US

**FEI Number:** 26-4336604

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FEBUS, LARRY J  
2266 CALLE DE CANTABRIA  
NAVARRE, FL 32566 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GARCIA, JOSE L  
Address 49 JONQUIL AVENUE NW  
City-State-Zip: FT WALTON BEACH FL 32548

Title S  
Name MARTINEZ, GERALDYN  
Address 1624 JENNIFER COURT  
City-State-Zip: FORT WALTON BEACH FL 32547

Title T  
Name FEBUS, LARRY J  
Address 2266 CALLE DE CANTABRIA  
City-State-Zip: NAVARRE FL 32566

*I hereby 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 all other like empowered.*

**SIGNATURE:** LARRY J. FEBUS

**TREASURER**

**03/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date