

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34110

**Entity Name:** BONNET HOUSE, INC.**Current Principal Place of Business:**900 N BIRCH ROAD  
FT LAUDERDALE, FL 33304-3326**Current Mailing Address:**900 N BIRCH ROAD  
FT LAUDERDALE, FL 33304-3326 US**FEI Number:** 65-0161955**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAVLOSKE, PATRICK  
900 N BIRCH RD  
FT LAUDERDALE, FL 33304 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           TREASURER  
Name           EPSTEIN, JOEY  
Address       301 E. LAS OLAS  
                  4TH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33301

Title           SECRETARY  
Name           HIGGINS, SUZANNE  
Address       4740 N. STATE RD. 7  
                  STE. 201  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title           D  
Name           GOLDBERG, NEIL  
Address       900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title           D  
Name           LA MARCA, EILEEN  
Address       900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title           CHAIRMAN  
Name           LABATE, JAMES  
Address       2744 E COMERCIAL BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33308

Title           VC  
Name           PALMER, LAURA  
Address       1350 S. POWER LINE RD  
                  STE. 111  
City-State-Zip: POMPANO BEACH FL 33069

Title           D  
Name           HOFFMANN, ASTRID  
Address       900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title           D  
Name           PALMER, ASHLEY  
Address       900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

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*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: PATRICK L SHAVLOSKE****CEO****02/12/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name REGENSDORF, SARAH  
Address 900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title D  
Name STONER, MARK  
Address 900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title DIRECTOR  
Name BRODY, PAIGE  
Address 2850 N. ANDREWS AVE.  
City-State-Zip: WILTON MANORS FL 33311

Title D  
Name SMALL, CHERYL  
Address 900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title D  
Name WEISER, ANDY  
Address 900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326

Title CEO  
Name SHAVLOSKE, PATRICK  
Address 900 N BIRCH ROAD  
City-State-Zip: FT LAUDERDALE FL 33304-3326