

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90042 033 ****61.25

DOCUMENT # 720372

1. Entity Name
EASTERN SHORES WHITE HOUSE ASSOCIATION, INC.



Principal Place of Business
**3660 NE 166TH ST.,
OFFICE BOX 817
N MIAMI BEACH, FL 33160**

Mailing Address
**3660 NE 166TH ST.,
OFFICE BOX 817
N MIAMI BEACH, FL 33160**

34014000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02062004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1533942

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**POLIAKOFF, GARY A., PRESIDENT
BECKER & POLIAKOFF, P. A.
3111 STIRLING ROAD
FT. LAUDERDALE, FL 33312**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRES ☒ Delete
NAME KUSEK, PATRICIA PRES
STREET ADDRESS 3660 NE 166TH ST, #408
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE PRESIDENT/SEC ☐ Change ☒ Addition
NAME SUSAN BARON
STREET ADDRESS 3660 NE 166 ST, #702
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE VP ☒ Delete
NAME STACHNIK, NANCY V. PRES
STREET ADDRESS 3360 NE 166TH ST. #806
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE V. PRESIDENT ☐ Change ☒ Addition
NAME MURRAY GLASER
STREET ADDRESS 3660 N.E. 166 ST, #604
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE TRES ☒ Delete
NAME GOLDMAN, DON TRES
STREET ADDRESS 3660 NE 166TH ST, #101
CITY-ST-ZIP N MIAMI BEACH, FL

TITLE TREAS ☐ Change ☒ Addition
NAME MARTIN RAPPOORT
STREET ADDRESS 3660 NE 166 ST, #802
CITY-ST-ZIP N MIAMI BCHA, FL 33160

TITLE SEC ☐ Delete
NAME SOLIS, MICHAEL SEC
STREET ADDRESS 3660 NE 166TH ST, #516
CITY-ST-ZIP N MIAMI BEACH, FL 33160

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

TITLE DIR ☒ Delete
NAME DIAMOND, CAROLYN DIRECTO
STREET ADDRESS 3660 NE 166TH ST, #110
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE DIRECTOR ☐ Change ☐ Addition
NAME SIDNEY REICHMAN
STREET ADDRESS 3660 NE 166 ST, #104
CITY-ST-ZIP N MIAMI BEACH, FL 33160

TITLE DIR ☒ Delete OF
NAME PACIFICO, RALPH DIRECTO
STREET ADDRESS 3660 NE 166 ST, 211
CITY-ST-ZIP N MIAMI BEACH, FL 33160
(DO NOT DELETE)

TITLE DIRECTOR ☐ Change ☒ Addition
NAME GLENN BARON
STREET ADDRESS 3660 NE 166 ST, #702
CITY-ST-ZIP N MIAMI BEACH, FL 33160
7TH OFFICER

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-04

Date

305-944-5039

Daytime Phone #