

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 750178 1. Entity Name CLUB RICHELIEU DE LA FLORIDE SUD, INC.					
Principal Place of Business 5121 S W 26 CT HOLLYWOOD, FL 33023 US			Mailing Address 5121 S W 26 CT HOLLYWOOD, FL 33023 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 4930 SW 25 CT Suite, Apt. #, etc.			
City & State FL 33023		City & State Pembroke Park FL			
Zip 33023		Country USA		4. FEI Number 59-1837103	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent SOUCY, MICHAEL 5121 S W 26 CT HOLLYWOOD, FL 33023				7. Name and Address of New Registered Agent Name Bruno MERCU Street Address (P.O. Box Number is Not Acceptable) 4930 SW 25 CT Pembroke Park FL 33023 City USN FL Zip Code 33023	
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 <u><i>[Signature]</i></u> 4-20-06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE					
Amended AR is \$61.25		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 VP NAME ETHIER, CLAUDE STREET ADDRESS 506 SW 26 ST CITY-ST-ZIP PEMBROKE PARK, FL 33023	☒ Delete		TITLE VP NAME BRUNO MERCU STREET ADDRESS 4930 SW 25 CT Pembroke Park FL CITY-ST-ZIP Vice President 33023	☐ Change ☒ Addition	
TITLE D NAME DUBE, MARGOT STREET ADDRESS 353 NE MAPLE ST CITY-ST-ZIP FORT LAUDERDALE, FL 33309	☐ Delete		TITLE NAME Yvon LeFevre STREET ADDRESS 210 Inagua St. CITY-ST-ZIP DAVIA FL 33004	☐ Change ☒ Addition	
TITLE D NAME STONGE, CAROL STREET ADDRESS 216 ML DOWELL CITY-ST-ZIP HALLANDALE, FL 33009	☒ Delete		TITLE NAME YVES Beauchamps STREET ADDRESS 2177 Hollywood Blvd CITY-ST-ZIP Hollywood FL 33020	☐ Change ☒ Addition	
TITLE VP NAME SOUCY, JEANNINE STREET ADDRESS 5121 SW 26 CT. CITY-ST-ZIP HOLLYWOOD, FL 33023	☒ Delete		TITLE NAME 700075553147 STREET ADDRESS 05/31/06--01023--003 **61.25 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE P NAME JUTRAS, ANDRE STREET ADDRESS 5031 SW 25 ST CITY-ST-ZIP PEMBROKE PARK, FL 33023	☒ Delete		TITLE NAME P. Michelle Lalond STREET ADDRESS 4930 SW 28 CT CITY-ST-ZIP Pembroke Park FL 33023	☐ Change ☐ Addition	
TITLE S NAME FOURNIER, ROSA STREET ADDRESS 5031 SW 25 CT CITY-ST-ZIP PEMBROKE PARK, FL 33023	☒ Delete		TITLE NAME Treasurer STREET ADDRESS 4930 SW 28 CT Pembroke Park CITY-ST-ZIP	☐ Change ☒ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 61X, 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: <u><i>[Signature]</i></u> 4-20-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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06 MAY 15 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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