

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90087 047 ****61.25

DOCUMENT # N02000004778

1. Entity Name
STONEWALL PRIDE, INC.



Principal Place of Business
P.O. BOX 70665
OAKLAND PARK, FL 33307 US

Mailing Address
P.O. BOX 70665
OAKLAND PARK, FL 33307 US

50013378



2. Principal Place of Business

3. Mailing Address

State, Act # etc.

State, Act # etc.

04052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
30-0154630

App. 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

PHELPS, GREG
2119 NE 1ST WAY
WILTON MANORS, FL 33305

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

Filing Fee is \$61.25
Due by May 1, 2006

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: ☐ Change ☐ Addition
NAME: **C PHELPS, GREG**
STREET ADDRESS: **2119 NE 1ST WAY**
CITY-STATE-ZIP: **WILTON MANORS, FL 33305**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: **2421 SW 9th Street**
CITY-STATE-ZIP: **Fort Lauderdale, FL 33312**

TITLE: ☐ Change ☐ Addition
NAME: **VC HANSEN, MARC A**
STREET ADDRESS: **795 SE 18TH CT., #3**
CITY-STATE-ZIP: **FORT LAUDERDALE, FL 33316**

TITLE: ☒ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: **TD DEIS, ROSCOE**
STREET ADDRESS: **396 NW 46H CT**
CITY-STATE-ZIP: **FORT LAUDERDALE, FL 33309**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☒ Change ☐ Addition
NAME: **S OBEL, STEFAN W**
STREET ADDRESS: **3229 E. ATLANTIC BLVD., #1007**
CITY-STATE-ZIP: **POMPANO BEACH, FL 33062**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: **S Joseph Halley**
STREET ADDRESS: **1625 NW 2nd Ave**
CITY-STATE-ZIP: **Fort Lauderdale, FL 33311**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 619, 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 that is not like empowered.

SIGNATURE:

Greg Phelps

Greg Phelps

15 April 2006

954-564-8707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR