

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2007 8:00 am
Secretary of State

04-09-2007 90089 033 ****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

66020192



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07022007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
30-0154630

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

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

7. Name and Address of New Registered Agent

Name **Roscoe E Deis**
Street Address (P.O. Box Number is Not Acceptable)
396 NW 46th Court
City **Fort Laud** FL Zip Code **33309**

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]

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

(NOTE: Registered Agent signature required when reinstating)

7/6/07

DATE

Filing Fee is \$61.25
Due by September 14, 2007

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

TITLE **C** ☒ Delete
NAME **PHELPS, GREG**
STREET ADDRESS **2119 NE 1ST WAY**
CITY-ST-ZIP **WILTON MANORS, FL 33305**

TITLE **VC** ☒ Delete
NAME **HANSEN, MARC A**
STREET ADDRESS **2421 SW 9TH ST**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33312**

TITLE **TD** ☐ Delete
NAME **DEIS, ROSCOE**
STREET ADDRESS **396 NW 46H CT**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33309**

TITLE **S** ☒ Delete
NAME **HALLEY, JOSEPH**
STREET ADDRESS **1825 NW 2ND AVE**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33311**

TITLE **Sec** ☐ Delete
NAME **Rox Tipton, Leslie Ann**
STREET ADDRESS **6751 N. University Dr #320**
CITY-ST-ZIP **Tamarac, FL 33321**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **Chairman** ☒ Change ☐ Addition
NAME **Hansen, Marc A**
STREET ADDRESS **2421 SW 9th St**
CITY-ST-ZIP **Ft Laud FL 33312**

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

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

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

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

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 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] **Roscoe E. Deis**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/07

Date

954-258-1428

Daytime Phone #