

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006919

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: FABULOUS FLORIDA FOLLIES, INC.

**Current Principal Place of Business:**

2922 N STATE RD 7  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

2922 N STATE RD 7  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 65-1078948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REFFSIN, SYLVIA  
7798 GRANVILLE DR  
TAMARAC, FL 33321 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: DOOLEY, CATHERINE  
Address: 2922 N STATE RD 7  
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete  
Name: FISHER, LILLIAN  
Address: 3300 N.E. 36TH ST. #1004  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: DT ( ) Delete  
Name: REFFSIN, SYLVIA  
Address: 7798 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: GORAB, DOUGLAS W PRES.  
Address: 3300 N.E. 36TH ST#1108  
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: DVP (X) Change ( ) Addition  
Name: CATHERINE, DOOLEY V.PRES.  
Address: 2922 N.STATE RD. 7  
City-St-Zip: MARGATE, FL 33063

Title: DT (X) Change ( ) Addition  
Name: REFFSIN, SYLVIA TR.  
Address: 7798 GRANVILLE DR  
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SYLVIA REFFSIN

DT

01/07/2009

Electronic Signature of Signing Officer or Director

Date