

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90048 014 ****70.00

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DOCUMENT # N02000008552

1. Entity Name

FRIENDS OF GULF STREAM, INC.



Principal Place of Business

**1065 S.E. 6 AVENUE
DANIA BEACH FL 33004**

Mailing Address

**1065 S.E. 6 AVENUE
DANIA BEACH FL 33004**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-3097796

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUFRESNE, JOHN
1065 S.E. 6 AVENUE
DANIA BEACH FL 33004**

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.

JOHN DUFRESNE, DIR.

(NOTE: Registered Agent signature required when reinstating)

3/12/03

DATE

FILE NOW: FEE 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
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
DUFRESNE, JOHN
1065 S.E. 6 AVENUE
DANIA BEACH FL 33004** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
CHINELLY, CINDY
1065 S.E. 6 AVENUE
DANIA BEACH FL 33004** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
TOUMEY, RICHARD
10833 CYPRESS GLEN DRIVE
CORAL SPRINGS FL 33071** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
BOND, JOHN
1085 SE 6TH AVENUE
DANIA BEACH FL 33004** ☐ Delete

TITLE
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CITY-ST-ZIP

☐ Delete

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☐ Change ☐ Addition

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: ☒

JOHN DUFRESNE, DIR 3/12/03 ☒

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)