

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000328

FILED
Jun 10, 2006
Secretary of State

Entity Name: SOUTH FLORIDA FLY FISHING CLUB, INC.

Current Principal Place of Business:

1027 POLK ST
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

1027 POLK ST
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CINDY RUSSELL
1027 POLK STREET
HOLLYWOOD, FL 33019 US

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: PD () Delete
Name: MEYER, GARY
Address: 1700 NE 27 DR
City-St-Zip: WILTON MANORS, FL 33334

Title: VD () Delete
Name: VALVERDE, JORGE
Address: 5040 SW 116 AVE
City-St-Zip: COOPER CITY, FL 33330

Title: VD () Delete
Name: OLIVIER, JOHN
Address: 1901 N. OCEAN BLVD. #8B
City-St-Zip: FT. LAUDERDALE, FL 33305

Title: SD () Delete
Name: LICATA, MELISSA
Address: 233 SE 11TH AVE
City-St-Zip: POMPANO BCH, FL 33060

Title: TD () Delete
Name: RUSSELL, CINDY
Address: 1027 POLK ST.
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUSSELL, CINDY
Address: 1027 POLK STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: VD (X) Change () Addition
Name: LICATA, ANTHONY
Address: 233 SE 11TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: VALVERDE, KELLY
Address: C/O 1027 POLK STREET
City-St-Zip: HOLLYWOOD, FL 33019

I hereby certify that the information supplied with this filing does not qualify for the 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: CINDY RUSSELL

P/D

06/10/2006

Electronic Signature of Signing Officer or Director

Date