



**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90044 040 \*\*\*\*61.25

**DOCUMENT # N03000006672**

1. Entity Name  
**OUTSIDE ACTIVITIES COMMUNITTEE, INC.**



Principal Place of Business  
**14585 LUCY DR  
DELRAY BEACH, FL 33484**

Mailing Address  
**14585 LUCY DR  
DELRAY BEACH, FL 33484**

**40012961**



01122005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**COHEN, ROSLYN  
14585 LUCY DR  
DELRAY BEACH, FL 33484**

**DO NOT WRITE  
IN THIS SPACE**

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 *Roslyn Cohen*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*2/1/05*  
DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE **D**  
NAME **GOSS, FRANCES** *Mildred Apamp*  
STREET ADDRESS **11400 CAMPANELLO DR** *6276 Dusenberry RD*  
CITY-ST-ZIP **DELRAY BEACH, FL 33484** *Delray Bch, FL 33484*

TITLE **D**  
NAME **COHEN, ROSLYN**  
STREET ADDRESS **14585 LUCY DR**  
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE **D**  
NAME **ACKERMAN, HILDA** *HELEN VAUGHN*  
STREET ADDRESS **11456 CAMPANELLO DR** *60563 Villa Silvannus*  
CITY-ST-ZIP **DELRAY BEACH, FL 33484** *Delray Bch FL 33484*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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: *Roslyn Cohen* *Roslyn Cohen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/1/05*  
Date

*561-498-4683*  
Daytime Phone



## Division of Corporations

40012961

## 2005 Annual Report

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	N03000006672
Business Entity Name	OUTSIDE ACTIVITIES COMMUNITTEE, INC.
Original File Date	07/31/2003

FEI Number Not Applicable

Principal Address 14585 LUCY DR  
DELRAY BEACH, FL 33484

Mailing Address 14585 LUCY DR  
DELRAY BEACH, FL 33484

Registered Agent ROSLYN COHEN  
14585 LUCY DR  
DELRAY BEACH, FL 33484 US

## Officer/Director Name And Address

D  
FRANCES GOSS  
14400 CAMPANELLI DR  
DELRAY BEACH, FL 33484

MILDRED ADAMO  
6276 DUSENBERG RD  
DELRAY BEACH, FL 33484

D  
ROSLYN COHEN  
14585 LUCY DR  
DELRAY BEACH, FL 33484

D  
HILDA ACKERMAN  
14456 CAMPANELLI DR  
DELRAY BEACH, FL 33484

Helen Vaughn  
6055 B Villa Silvanus  
DELRAY BEACH, FL 33484

If all of the above information is correct and you do not wish to make any changes, please select:

If you need to make changes to the above information, please select: