

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N08906		
1. Entity Name F.D.N.Y. RETIREES, INC., PALM BEACH COUNTY DIVISION		

Principal Place of Business 8530 WHITE EGRET WAY LAKE WORTH FL 33467	Mailing Address 8530 WHITE EGRET WAY LAKE WORTH FL 33467
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number **59-2589292** Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent	
MCDONALD, DAVID C. 8530 WHITE EGRET WAY LAKE WORTH FL 33467	

7. Name and Address of New Registered Agent	
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 (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	SIMMS, RAYMOND
STREET ADDRESS	7355 FALLS ROAD WEST
CITY-ST-ZIP	BOYNTON BEACH FL 33437-6311
TITLE	V
NAME	ABBOTT, VICTOR
STREET ADDRESS	440 KELSEY PARK DRIVE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410
TITLE	ST
NAME	MCDONALD, DAVID C
STREET ADDRESS	8530 WHITE EGRET WAY
CITY-ST-ZIP	LAKE WORTH FL 33467
TITLE	D
NAME	CUCCIO, MICHAEL V
STREET ADDRESS	4740 D NW 3RD ST
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	D
NAME	KURTZ, RICHARD
STREET ADDRESS	1221 SW 26TH AVENUE
CITY-ST-ZIP	BOYNTON BEACH FL 33426
TITLE	D
NAME	CLARKE, ANDREW
STREET ADDRESS	770 HORIZONS EAST #206
CITY-ST-ZIP	BOYNTON BEACH FL 33435

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 Section 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.

David C. McDonald