

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 02, 2006 08:00 AM
Secretary of State

DOCUMENT # N08956

1. Entity Name
FEDERATION-GULFSTREAM HOUSING, INC.



Principal Place of Business
9901 DONNA KLEIN BLVD
BOCA RATON, FL 33428 US

Mailing Address
9901 DONNA KLEIN BLVD
2255 GLADES ROAD, SUITE 340W
BOCA RATON, FL 33428 US



01272006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2541344

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GORTZ, ALBERT W
2255 GLADES ROAD
SUITE 340W
BOCA RATON, FL 33431

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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

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

1100000453403
03/14/06-80021-002 70.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NOBIL, JAMES
STREET ADDRESS	5735 NW 40TH WAY
CITY-ST-ZIP	BOCA RATON, FL 33406
TITLE	D
NAME	GORTZ, ALBERT
STREET ADDRESS	7565 BELLA VERDE WAY
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	VD
NAME	ROBINS, ANDREW
STREET ADDRESS	3225 ST. JAMES DR.
CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	TD
NAME	ALTNEIMER, JEROME
STREET ADDRESS	7383 ORANGEWOOD LANE, #501
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	SD
NAME	DECKINGER, ERIC
STREET ADDRESS	7099 VALENCIA DR.
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Eric Deckinger*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/06

561-482-0523

Date Daytime Phone #