

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 14, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90062 012 \*\*\*\*61.25

**DOCUMENT # N31974**

1. Entity Name

TALLOWWOOD SOCIAL CLUB, INC.



Principal Place of Business

6463 NW 32 AVENUE  
COCONUT CREEK FL 33073  
US

Mailing Address

Wildermuth Raymond  
3607 NW 67th St.  
Coconut Creek, FL 33073-3287

FL 33073

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

MOORE

CR2E037 (11/03)

4. FEI Number

59-2918844

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SQUIRE, STEVEN F.  
625 N.E. THIRD AVENUE  
FT. LAUDERDALE FL 3304

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, 2004**

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 : PD ☐ Delete  
NAME NEIMAN, HELEN  
STREET ADDRESS 6592 NW 35TH AVE  
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE 1VP ☒ Delete  
NAME WILDERMUTH, RAYMOND  
STREET ADDRESS 3607 NW 67TH STREET  
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE 1VP ☒ Change ☐ Addition  
NAME HASSELTINE CHARLES  
STREET ADDRESS 6537 N.W. 37 AVENUE  
CITY-ST-ZIP COCONUT CREEK, FL. 33073

TITLE D2VP ☒ Delete  
NAME SIMPSON, SHELIA  
STREET ADDRESS 6538 NW 37TH AVE  
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE D2VP ☒ Change ☐ Addition  
NAME DELVECCHIO, EVO  
STREET ADDRESS 3611 N.W. 64TH COURT  
CITY-ST-ZIP COCONUT CREEK, FL. 33073

TITLE S ☒ Delete  
NAME HYND, MARION  
STREET ADDRESS 6562 NW 37TH AVE  
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE S ☒ Change ☐ Addition  
NAME SIMPSON SHELIA  
STREET ADDRESS 6538 N.W. 37th Avenue  
CITY-ST-ZIP COCONUT CREEK, FL. 33073

TITLE TD ☒ Delete  
NAME ST. PETER, ROSEMARY  
STREET ADDRESS 6548 NW 33RD AVE  
CITY-ST-ZIP POMPANO BEACH FL 33073

TITLE TR ☒ Change ☐ Addition  
NAME RAYMOND WILDERMUTH  
STREET ADDRESS 3607 N.W. 67th STREET  
CITY-ST-ZIP COCONUT CREEK, FL. 33073

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Rosemary St. Peter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/15/04

Daytime Phone #

954-596-2481