

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90070 033 ****61.25

DOCUMENT # N37835

1. Entity Name

FLORIDA GOLD COAST CHAPTER HFTP, INC.



Principal Place of Business

Mailing Address

100 NE 3RD AVENUE
STE 300
FORT LAUDERDALE FL 33301
US

100 NE 3RD AVENUE
STE 300
FORT LAUDERDALE FL 33301
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-0190978

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

TASSITANO, TAMMY
MCGLADREY & PULLEN
100 NE THIRD AVENUE STE 300
FORT LAUDERDALE FL 33301-1146

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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	LANGLAIS, MARK	
STREET ADDRESS	1100 S OCEAN BLVD	
CITY- ST- ZIP	PALM BEACH FL 33480	
TITLE	P	☒ Delete
NAME	LEE, AMY	
STREET ADDRESS	11501 EL CLAIR RANCH RD.	
CITY- ST- ZIP	BOYNTON BEACH FL 33437	
TITLE	SECRETARY	☒ Delete
NAME	HARRY RUSSO	
STREET ADDRESS	12422 CLASSIC DR	
CITY- ST- ZIP	CORAL SPRINGS, FL 33071	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	MIRIAM WISE	
STREET ADDRESS	7100 FAIRWAY DRIVE	
CITY- ST- ZIP	WEST PALM BEACH, FL 33418	
TITLE	SECRETARY	☒ Change ☐ Addition
NAME	RICHARD COLLETTE	
STREET ADDRESS	3600 HAMLET DRIVE	
CITY- ST- ZIP	DELRAY BEACH, FL 33445	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	JO ANNA SCHILLACI	
STREET ADDRESS	20583 BOCA WEST DR	
CITY- ST- ZIP	BOCA RATON, FL 33445	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	GREGORY CRAWMER	
STREET ADDRESS	777 E. ATLANTIC AVE	
CITY- ST- ZIP	DELRAY BEACH, FL 33445	
TITLE	TREASURER	☐ Change ☐ Addition
NAME	STEPHEN J. LAMPEL	
STREET ADDRESS	2745 N. CLEARCROW CIRCLE	
CITY- ST- ZIP	DELRAY BEACH, FL 33447	
TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	KAENO SHIRSU	
STREET ADDRESS	100 NE THIRD AVE - 300	
CITY- ST- ZIP	FORT LAUDERDALE, FL 33301	

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.

SIGNATURE: *Stephen J. Lampel* **STEPHEN J. LAMPEL** 4/12/07 (561)-831-4771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #