

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40022

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA FENCE ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O LYNNE PETERSON  
1156 SOUTH MILITARY TRAIL  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

C/O GLORIA LAWRENCE  
211 COMMERCE WAY  
JUPITER, FL 33458

**Current Mailing Address:**

C/O LYNNE PETERSON  
P.O. BOX 5888  
LAKE WORTH, FL 33466

**New Mailing Address:**

C/O GLORIA LAWRENCE  
211 COMMERCE WAY  
JUPITER, FL 33458

**FEI Number:** 65-0301398

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PETERSON, LYNNE D  
1156 SOUTH MILITARY TRAIL  
WEST PALM BEACH, FL 33415 US

**Name and Address of New Registered Agent:**

LAWRENCE, GLORIA J  
211 COMMERCE WAY  
JUPITER, FL 33458 US

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.

SIGNATURE: GLORIA LAWRENCE

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SEAMAN, LEE G  
Address: 4663 S.W. 45 STREET  
City-St-Zip: DAVIE, FL 33314

Title: T  
Name: LAWRENCE, GLORIA J  
Address: 211 COMMERCE WAY  
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GLORIA LAWRENCE

TREA

02/16/2011

Electronic Signature of Signing Officer or Director

Date