

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46704

1. Entity Name

ST. PATRICK'S G.A.A. FLORIDA, INC.

**FILED**  
**Aug 17, 2001 8:00 am**  
**Secretary of State**

08-17-2001 90003 021 \*\*\*\*61.25

0010174

Principal Place of Business

6811 PARK ST  
HOLLYWOOD FL 33024

Mailing Address

299 N.W. 11TH STREET  
BOCA RATON FL 33432  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0309831

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

HENDERSON, HARRY J  
299 N.W. 11TH STREET  
BOCA RATON FL 33432

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.

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**  
**After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MCKENNA, LIAM  
435 N.W. 136TH STREET  
N. MIAMI FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BARRETT, JOHN  
3326 QUAIL CLOSE  
POMPANO BEACH FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
HYNES, MARTIN  
2352 N.W. 39TH AVENUE  
COCONUT CREEK FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
R  
WALSH, NOEL  
3330 N.E. 14TH AVENUE  
POMPANO BEACH FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HENDERSON, HARRY J  
299 N.W. 11TH STREET  
BOCA RATON FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
BARRETT, JOHN  
3326 QUAIL CLOSE  
POMPANO BEACH FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

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: *[Signature]*

8/14/01 361-367-7770

CR2E037 (5/01)