

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46704

Entity Name: ST. PATRICK'S G.A.A. FLORIDA, INC.

FILED
May 06, 2004
Secretary of State

Current Principal Place of Business:

6811 PARK ST
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 65-0309831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCKENNA, LIAM
Address: 435 N.W. 136TH STREET
City-St-Zip: N. MIAMI, FL

Title: D () Delete
Name: BARRETT, JOHN
Address: 3326 QUAIL CLOSE
City-St-Zip: POMPANO BEACH, FL

Title: S () Delete
Name: HYNES, MARTIN
Address: 2352 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL

Title: R () Delete
Name: WALSH, NOEL
Address: 3330 N.E. 14TH AVENUE
City-St-Zip: POMPANO BEACH, FL

Title: D () Delete
Name: HENDERSON, HARRY J
Address: 299 N.W. 11TH STREET
City-St-Zip: BOCA RATON, FL

Title: AS () Delete
Name: BARRETT, JOHN
Address: 3326 QUAIL CLOSE
City-St-Zip: POMPANO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HARRY HENDERSON

MR

05/06/2004

Electronic Signature of Signing Officer or Director

Date