

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000100

FILED
Jan 05, 2012
Secretary of State

Entity Name: GOLDEN GLOVES CHARITIES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

6215 OLD COURT ROAD
SUITE 504
BOCA RATON, FL 334337835

New Principal Place of Business:

21346 ST. ANDREWS BLVD.
SUITE 137
BOCA RATON, FL 33433

Current Mailing Address:

6215 OLD COURT ROAD
SUITE 504
BOCA RATON, FL 334337835

New Mailing Address:

21346 ST. ANDREWS BLVD.
SUITE 137
BOCA RATON, FL 33433

FEI Number: 65-0380854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STREISAND, MARK
6215 OLD COURT ROAD
SUITE 504
BOCA RATON, FL 334337835 US

Name and Address of New Registered Agent:

STREISAND, MARK
3740 S. OCEAN BLVD.
710
HIGHLAND BEACH, FL 33487 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:

01/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: STREISAND, MARK
Address: 6215 OLD COURT ROAD, SUITE 504
City-St-Zip: BOCA RATON, FL 334337835

Title: D
Name: PRESENT, STEVE
Address: 9655 S DIXIE HWY #104
City-St-Zip: MIAMI, FL 33156

Title: D
Name: BARRENECHE, SANDRA
Address: 3740 S. OCEAN BLVD. #710
City-St-Zip: HIGHLAND BEACH, FL 33487

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: MARK STREISAND

D

01/05/2012

Electronic Signature of Signing Officer or Director

Date