

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90302 029 ****61.25

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1. Entity Name

OVEREATERS: "THE H.O.W. CONCEPT", A 12 STEP
FELLOWSHIP, INC.



Principal Place of Business

4996 N PINE ISLAND DR.
LAUDERHILL FL 33351

Mailing Address

3847 S. CIRCLE DR
#17
HOLLYWOOD FL 33021
US

2. Principal Place of Business

3847 S. CIRCLE DR.

3. Mailing Address

Suite, Apt. #, etc.
#17

Suite, Apt. #, etc.

City & State

Hollywood FL

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0607165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GASS, DANIEL G
10001 NW 50TH ST, #204
SUNRISE FL 33351

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. 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE DS ☒ Delete
NAME YORK, GAIL
STREET ADDRESS 3550 WASHINGTON ST. 508B
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE DT ☐ Delete
NAME GRUBBE, ROSEMARY A
STREET ADDRESS 3847 S. CIRCLE DR., #17
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE DP ☒ Delete
NAME FINE, DIANA
STREET ADDRESS 12621 SW 18TH ST
CITY-ST-ZIP HOLLYWOOD FL 33027

TITLE DV ☒ Delete
NAME SEGALL, ALANA
STREET ADDRESS 8771 HOLLY CT 103
CITY-ST-ZIP FORT LAUDERDALE FL 33321

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DS ☐ Change ☒ Addition
NAME ALEAL ZEGANS
STREET ADDRESS 1300 ST. CHARLES PLACE #204
CITY-ST-ZIP PEMBROKE PINES, FL 33026

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

TITLE DP ☐ Change ☒ Addition
NAME ERIC ROSEN
STREET ADDRESS 400 COMMODORE DR. #314
CITY-ST-ZIP PLANTATION, FL 33325

TITLE DV ☐ Change ☒ Addition
NAME P.J. FERRONE
STREET ADDRESS 8508 CHERRY BLOSSOM LANE
CITY-ST-ZIP TAMARAC, FL 33321

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

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

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: Rosemary A. Grubbe ROSEMARY A. GRUBBE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/20/04