

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90098 012 ****61.25

DOCUMENT # N98000000460

1. Entity Name
ENTERPRISE CORAL SPRINGS, INC.



Principal Place of Business
**11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

Mailing Address
**11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

94006790



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0802286

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CAWLEY, PAUL F
11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

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

Paul Cawley

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVC
SLATTERY, DENNIS
4621 WINWARD COVE LANE
LAKE WORTH, FL 33467** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
MICHAEL NEIDER
12095 NW 39 ST
CORAL SPRINGS, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
MOYLE, BERNARD T ESQ
1875 SW 4 AVENUE
DELRAY BEACH, FL 33444** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
ROSSOMAO, GLORIA
3111 N. UNIVERSITY DR.
CORAL SPRING, FL 33065** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
TOM WEBER
3111 N. UNIVERSITY DR #725
CORAL SPRINGS, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
WEBER, TOM
3111 N. UNIVERSITY DR.
POMPANO BEACH, FL 33065** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
JOY CARTER
2780 UNIVERSITY DR
CORAL SPRINGS, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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:

Gloria Rossomano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**GLORIA
ROSSOMANO,
TREASURER**

1/22/04

Date

**954
346-6996**

Daytime Phone