2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N98000002967

1. Entity Name
ROOSEVELT ESTATE SOUTH INC.

Principal Place of Business	Mailing Address
% WESTWARD ELEMENTARY 1101 GOLF AVENUE WEST PALM BEACH, FL 33401	P.O. BOX 2842 WEST PALM BEACH, FL 33402

08172004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
65-0939356
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STUBBS, MOSES B
1440 CROSS WAY
WEST PALM BEACH, FL 33401

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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 Moses B. Stubbs Jr. 8/17/04
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 September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	STUBBS, MOSES
STREET ADDRESS	1440 CROSS WAY
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	VPD
NAME	KING, JULIA A
STREET ADDRESS	1548 SIXTH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	S
NAME	RICHARDSON, BOBBIE L
STREET ADDRESS	1447 CROSS WAY
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	CS
NAME	BOYNTON, GENEVA B
STREET ADDRESS	1350 EIGHTH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	TD
NAME	WITHERSPOON, JOSEPH
STREET ADDRESS	1557 SIXTH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	P
NAME	LITTLES, DORIS W
STREET ADDRESS	1331 SIXTH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

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08/23/04-80008-002 61.25

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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: JOSEPH W. THOMPSON 8-17-04 561-832-7434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #