

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90310 005 ****61.25

DOCUMENT # N99000004628

1. Entity Name
**OUTDOOR ADVENTURES KLUB OF SOUTH FLORIDA,
INC.**



Principal Place of Business
**5521 POLK SR
HOLLYWOOD, FL 33021**

Mailing Address
**5521 POLK SR
HOLLYWOOD, FL 33021**

50036946



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0940112

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

**LONDON, JORDAN
5521 POLK ST
HOLLYWOOD, FL 33021**

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

**Filing Fee is \$61.25
Due by May 1, 2005**

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 PD ☒ Delete
NAME REITOR, ANDREA
STREET ADDRESS 2684 SW 65 ST
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE PRESIDENT ☒ Change ☐ Addition
NAME RUBY JUNE ALLMAN
STREET ADDRESS 5521 POLK STREET
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE VPD ☒ Delete
NAME HARTY, RICHARD
STREET ADDRESS 2627 MADISON ST
CITY-ST-ZIP HOLLYWOOD, FL 33020

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME TOM FIERROS
STREET ADDRESS 1660 S.W. 65TH AVENUE
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE TD ☐ Delete
NAME KIRSHEN, RICHARD
STREET ADDRESS 9081 SW 56 ST
CITY-ST-ZIP FORT LAUDERDALE, FL 33328

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

TITLE CPMD ☒ Delete
NAME NEVILLE, DIANE
STREET ADDRESS 6740 ALLEN STREET
CITY-ST-ZIP HOLLYWOOD, FL 33024

TITLE PUBLICITY CHAIR ☒ Change ☐ Addition
NAME SAL CASQUARELLI
STREET ADDRESS 367 SOUTH FEDERAL HIGHWAY - #206B
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE ~~CPMD~~ ☒ Delete
NAME PRIGAL, HARRIET
STREET ADDRESS 19195 MYSTIC POINT DRIVE #1503
CITY-ST-ZIP AVENTURA, FL 33180

TITLE SECRETARY ☒ Change ☐ Addition
NAME JORDAN LONDON
STREET ADDRESS 5521 POLK STREET
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE M ☐ Delete
NAME FISCHLER, ROY
STREET ADDRESS 4477 NW 99 WAY
CITY-ST-ZIP FORT LAUDERDALE, FL 33351

TITLE ☐ Change ☐ Addition
NAME SAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORDAN LONDON

Date

Daytime Phone #

4/15/05 954-357-6290