

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005196

FILED
Jan 07, 2004
Secretary of State

Entity Name: WISH FRIENDS OF SOUTHERN FLORIDA, INC.

Current Principal Place of Business:

2901 STIRLING RD.,STE.208
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

2901 STIRLING RD.,STE.208
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0960968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROM, NANCY
2901 STIRLING RD.,STE.208
FT. LAUDERDALE, FL 33312

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KINGSLEY, LOUISE
Address: 8551 W SUNRISE BLVD # 203
City-St-Zip: SUNRISE, FL 33322

Title: D () Delete
Name: GAGIC, CHRISTOPHER
Address: 18185 181 CIRCLE S
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: DAVIS, GARY
Address: 7820 S.W. 170TH STREET
City-St-Zip: MIAMI, FL 33157

Title: C () Delete
Name: DEMAR, STEVE
Address: 14305 S.W.74TH AVE.
City-St-Zip: MIAMI, FL 33188

Title: S () Delete
Name: FRIEDLANDER, RANDY
Address: 1412 S.W. 74TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: D () Delete
Name: MORRIS, PATRICK
Address: 35 VENETIAN WAY,#E-11
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GARY DAVIS

CHAI

01/07/2004

Electronic Signature of Signing Officer or Director

Date