

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2004 8:00 am
Secretary of State

02-05-2004 90011 005 ***150.00

DOCUMENT # P02000074615

1. Entity Name
SOUTH FLORIDA CRAFTSMAN GUILD, INC.



Principal Place of Business
**805 NW BOCA RATON BLVD
BOCA RATON, FL 33432**

Mailing Address
**805 NW BOCA RATON BLVD
BOCA RATON, FL 33432**

44007246



2. Principal Place of Business
805 N.W. BOCA RATON BLVD
Suite, Apt. #, etc.

3. Mailing Address
805 NW BOCA RATON BLVD
Suite, Apt. #, etc.

01262004 Chg-P CR2E034 (10/03)

City & State
BOCA RATON FL
Zip
33432 Country
U.S.A.

City & State
BOCA RATON FL
Zip
33432 Country
USA

4. FEI Number
30-0180403 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PALMER, PAT
805 NW BOCA RATON BLVD
BOCA RATON, FL 33432**

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 \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SHEPARD, EDWARD
805 NW BOCA RATON BLVD
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
REISER, VERONICA
805 NW BOCA RATON BLVD
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
PALMER, PATRICIA
805 NW BOCA RATON BLVD
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
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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 607, 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

2/2/04

Date

Daytime Phone #

Attachment

#P02000074615



44007245

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 26, 2004

SOUTH FLORIDA CRAFTSMAN GUILD, INC.
805 NW BOCA RATON BLVD
BOCA RATON, FL 33432

SUBJECT: SOUTH FLORIDA CRAFTSMAN GUILD, INC.
Ref. Number: P02000074615

We have received your document for SOUTH FLORIDA CRAFTSMAN GUILD, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 804A00004502