2003 UNIF

## **FILED** am te

| 3 FOR PROFIT CORPOR<br>ORM BUSINESS REPOR | Aug 04, 2003 8:00<br>Secretary of Stat |
|---|--|
| 70000074045                               | Secretary or Stat                      |

| 1. Entity Nan                             |  | 00074615<br>.d, inc.   | /.         |                                       | 10000000000000000000000000000000000000 | 04-24-200  | 3 9024                  | 48 006 **             | *158.75                       |
|---|--|--|------------|---------------------------------------|--|--|-------------------------|-----------------------|-------------------------------|
| , .                                       | ce of Business<br>A RATON BLVD<br>I FL 33432   | Mailing Address<br>805 MW BOCA RATON B<br>BOCA RATON FL 33432  | LVD        | · · · · · · · · · · · · · · · · · · · |  |  |                         | 0531                  |                               |
| 2. Principal F                            | Place of Business  | 3. Mailing Address   |            |                                       |  | A profit the state of the state | THE LL                  |                       |                               |
| Suite, Apt.                               | <del></del>  | Suite, Apt. #, etc.  |            |                                       |  | CHECK HERE I   | MAKIN                   | IG CHANGE             | S                             |
| City & Stat                               | le   | City & State   |            |                                       |  | FEI Number<br>0-0180 40 3  |                         | <b>├</b> ─            | Applied For<br>Not Applicable |
| Zip                                       | Country  | . Zip  | Cour       | itry                                  | 5.                                     | Certificate of Status Desired  | X                       | \$8.75 A<br>Fee Requi | dditional ;<br>red            |
|   | 6. Name and Address of Current   | Registered Agent   |            |                                       | 7.                                     | Name and Address of New Re   | gistered                | Agent                 |                               |
| PALMER,                                   | PAT  | · · · · · · ·  |            | Name                                  |  | -,   |                         |                       |                               |
| 805 NW B                                  | BOCA RATON BLVD  |  | :          | Street Addres                         | ss (P.O. Box Number is Not Acceptable) |  |                         |                       |                               |
| BUCA HA                                   | TON FL 33432   |  |            | City                                  |  |  | F                       | Zip Co                | de                            |
|   |  |  |            | <u></u>                               |  |  |                         |                       |                               |
| 8. "The above<br>the obligat<br>SIGNATURE | named entity submits this statement to tions of registered agent.  Signature typed or prived name of registered agent.   | por  |            |                                       |  | <u> </u>   | da. lam                 |                       | , and accept                  |
| Afte                                      | ILE NOWIN/FEE IS \$170.00 (C<br>(May 1, 2003 Fee will be \$550.00)<br>k Payable to Florida Department of   |  |            | d Agent signature requi               |  | 9. Election Campaign Final<br>Trust Fund Contribution.   |                         |                       | 00 May Be<br>ed to Fees       |
| 10.                                       | OFFICERS AND   |  | 11.        |                                       | AD                                     | DOITIONS/CHANGES TO OFFIC  | ERS AN                  | D DIRECTOR            |                               |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP     | P<br>SHEPARD, EDWARD<br>805 NW BOCA RATON BLVD<br>BOCA RATON FL 33432  | □ Deleta .   | 1          |                                       | •                                      |  |                         | Change                | ☐ Addition                    |
| TITLE NAME STREET ADDRESS CITY-ST-ZP      | V<br>REISER, VERONICA<br>805 NW BOCA RATON BLVD<br>BOCA RATON FL 33432   | Delde .  |            |                                       |  |  |                         | ☐ Change              | ☐ Addition                    |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP     | S<br>PALMER, PATRICIA<br>805 NW BOCA RATON BLVD<br>BOCA RATON FL 33432   | □ Deleta   |            |                                       | ***                                    | general construction of the second   | - حص                    | ☐ Change              | Addition                      |
| NAME STREET ADDRESS CITY-ST-ZIP           |  | C Deficite   |            |                                       |  | /  |                         | ☐ Change              | Addition                      |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP     |  | C Delde  | I          | í                                     |  |  |                         | Change                | Addition                      |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP     | ·  | ☐ Delate   | city-      | ET ADDRESS<br>ST-ZIP                  | •                                      |  |                         | ☐ Change              | Addition                      |
| indicated of the cor                      | certify that the information supplied with<br>on this report or supplemental report is<br>reportation or the receiver or trustee emport,<br>or on an attachment with an address, w | true and accurate and that m<br>wered to execute this report a | ıv sıanatı | are shall have the                    | seeme a                                | egal effect as il made under oat<br>fa Statules; and that my name a  | h; that I é<br>ppears i | an an ollicer         | or director 1                 |
| SIGNAT                                    |  | PONTED NAME OF SIGNING OFFICER OF                              | OR DIRECTO | Wy                                    |  | 4/18/2003  | 3                       | Sylime Phone #        |                               |

Attachment#

## SOUTH FLORIDA CRAFTSMAN GUILD, INC. 805 N.W. BOCA RATON BOULEVARD BOCA RATON, FL 33432

\$50053118 \$P02000074615

July 31, 2003

Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Re: Reference No. P02000074615 South Florida Craftsman Guild, Inc.

To Whom It May Concern:

Enclosed please find the corrected Annual Report/Uniform Business Report that has been signed in both places by an officer of the corporation. Please file the report.

Thank you for your assistance in this matter.

Sincerely,

Carol M. Levin

Secretary

Attachment II

Copy of Brevious letter sense to your

rations
Report Filings
2302-1500

Division of Corporations Uniform Business Report Filings P. O. Box 1500

Tallahassee, FL 32302-1500

July 17, 2003

Re: Document: PO2000074615

South Florida Craftsman Guild, Inc.

To Whom It May Concern:

I am sending a copy of the above Uniform Business Report Document which was originally sent on time with a check. (which you still have). Unfortunately, the form was returned to us because we did not have a FEI Number at the time for South Florida Craftsman Guild, Inc. We applied for the number, but when we received it back, it was after the due date to file – so we were late. I am enclosing a copy of a letter from the Department of Treasury to show you the date we received this notice with the FEI number was after the date we needed to file.

We would like to have the penalty fee waived because of this, and thank you in advance for your consideration.

Sincerely,

Carol Levin Administrative Assistant

**Enclosures**