

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000008217

Entity Name: A DREAM FOR BORGNE,INC**Current Principal Place of Business:**4206 LAKESIDE DRIVE
TAMARAC, FL 33319**Current Mailing Address:**PO BOX 1296
FORT LAUDERDALE, FL 33302 US**FEI Number:** 85-2191357**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HJP FINANCIAL SERVICES INC
2733 OAK RIDGE COURT
103
FORT MYERS, FL 33901 US*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**Officer/Director Detail :**

Title	P
Name	SAINT-PREUX, NAHUM
Address	4206 LAKESIDE DRIVE
City-State-Zip:	TAMARAC FL 33319

Title	VP
Name	JEAN-LOUIS, DELY
Address	4941 NW 41 STREET
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	T
Name	TOUSSAINT, ALAN
Address	947 ASHTON OAK CIRCLE
City-State-Zip:	STONE MOUNTAIN GA 30083

Title	S
Name	JEAN-PIERRE, ROSELAINE
Address	260 NE 30TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

Title	ED
Name	JEAN-PIERRE, LYDIE
Address	911 NW 48TH PLACE
City-State-Zip:	DEERFIELD BEACH FL 33064

Title	D
Name	LISME, WESLY J
Address	115 LAKE EMERALD DRIVE
City-State-Zip:	OAKLAND PARK FL 33309

I hereby 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 all other like empowered.

SIGNATURE: NAHUM SAINT-PREUX

P

04/26/2023

Electronic Signature of Signing Officer/Director Detail_____
Date