

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34110

**Entity Name:** BONNET HOUSE, INC.

**Current Principal Place of Business:**

900 N BIRCH ROAD  
FT LAUDERDALE, FL 33304-3326

**Current Mailing Address:**

900 N BIRCH ROAD  
FT LAUDERDALE, FL 33304-3326 US

**FEI Number:** 65-0161955

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHAVLOSKE, PATRICK  
900 N BIRCH RD  
FT LAUDERDALE, FL 33304 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           TREASURER  
Name           EPSTEIN, JOEY  
Address        301 E. LAS OLAS  
                  4TH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33301

Title           CHAIRMAN  
Name           LABATE, JAMES  
Address        2744 E COMERCIAL BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33308

Title           SECRETARY  
Name           HIGGINS, SUZANNE  
Address        4740 N. STATE RD. 7  
                  STE. 201  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title           VC  
Name           SIRES, CARLOS  
Address        401 E. LAS OLAS BLVD.  
                  STE. 1200  
City-State-Zip: FT. LAUDERDALE FL 33301

Title           CEO  
Name           SHAVLOSKE, PATRICK  
Address        900 N. BIRCH RD.  
City-State-Zip: FT. LAUDERDALE FL 33304

*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:** PATRICK L SHAVLOSKE

**CEO**

**02/28/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date