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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 703295

1. Corporation Name

SOUTH FLORIDA COUNCIL INC., BOY SCOUTS OF AMERIC

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90008 013 ****70.00

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Principal Place of Business Mailing Address								•				
15255 NW 82ND AVE MIAMI LAKES FL 33016 US		15255 NW 82ND AVE				1 (100) (10	AN 18188 NAM NAM (818)	4 (1) 4 (4) 4(4)				
			MIAMI LAKES FL 33016									
		US					ON BOIRD HIND HERD HOLDI	BIRI BIBII BIBII				
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2. Principal I	Place of Business	2a. Mailing Addre	ess				orated or Qualifed				ĺ	
21		26				12/07/19	<i>1</i> 61				1	
Suite, Apt	. #, etc.	Suite, Apt. #,	etc.			4. FEI Numbe			Apr	lied For	l	
22		27				59-06378	317		Not	Applicable	l	
City & Sta	ate	City & State				# O. 475-4-	- Chatra Desired	ro/	\$8.75 A	dditional	ĺ	
23		28				a. Certificate o	of Status Desired	X	Fee Rec	quired	i	
Zip	Country	Zip		Country		6. Election Ca	ampaign Financing		\$5.00	May Be	l	
⊢ '	25 29		30				Contribution		Added to Fees			
24	9. Name and Address of Curi			T		10. Name and	Address of New Re	egistered A	gent			
	- Name and Address of our	Total Trogramme 7 igoni		81	Name						ĺ	
									· · ·		ı	
	NN, JEFFRIE A			82	Street A	ddress (P.O. Box Nu	mber is Not Acceptat	ole)			ĺ	
15255 NV	N 82ND AVE			83			 				ĺ	
Miami La	KES FL 33016			63					,		ĺ	
				84	City				85 Zip C	ode	ĺ	
				1	,			FL	<u> </u>		1	
11. Pursuan	t to the provisions of Sections 617.0 registered agent, or both, in the Sta	502 and 617.1508, Flori	da Statutes, the	e above	-named c	orporation submits the	is statement for the p	surpose of cl	nanging its i	registered ristered	ĺ	
office or	registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Such changing ations of Section 617.	ge was authori. 0503, Florida S	izeu by Statutes	ine corpor	anon sipoard or direc	tors. I flordby accept				-	
											l	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Regist	tered Ager	t signature rec	quired when reinstating)		DATE			é	
12.		AND DIRECTORS		13.		ADDITIONS	CHANGES TO OFF	ICERS AND			=	
TITLE	P	□ D	ELETE 1.	I,1 TITLE					Change	Addition	3	
NAME	TILLETT, WILLIAM R		1	2 NAME	- 1						1,	
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	HERRMANN, JEFFRIE A	<u> </u>	ELETE 2.	2.1 TITLE 2.2 NAME					☐ Change	Addition	יומני	
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CITY-ST-ZIP 14. 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 annual report or supplementananual 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 secewer or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS