2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # 719190

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

WILLIAMS, THEODORA

6421 NW 54TH COURT

LAUDERHILL FL 33319

3491 NW 2ND STREET

FORT LAUDERDALE FL 33311

MCELVY, JULIA

PRES

FIFLE

NAME

TITLE

NAME



FILED Feb 11 2008 08:00 Al

Change

Change

C Addition

Addition

1. Entity Name											f State	
NORTHWEST FEDERATED WOMAN'S CLUB OF BROWARD COUNTY, INC.								ĸ.	eci et	ary U	Statt	
Principal Plac	ce of Business	Mailing	Address		1 .							
2161 N.W. 19TH STREET FT LAUDERDALE FL 33311			P.O. BOX 5622 FT LAUDERDALE FL 33310-5622 US									
Principal Place of Business - No P.O. Box # 3. Mailing Address))		1911 Q(Q() 9(Q() 8(9	 	
Suite, Aps. #, etc.			Suite, Apt #, etc.				1st MOORE CR2E037 (10/07)					
City & State			City & State				4. FEI Number 23-7113192 Applied For Not Applicable					
Zip	Country Zip		Cou		untry					\$8.75 Add Fee Require		
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
					Name							
MCELVY, JULIA G 3491 NW 2ND STREET FORT LAUDERDALE FL 33311					Street Address (P.O. Box Number is Not Acceptable)							
						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 SIGNATURE (NOTE: Registered Apent signature resulted when reinstang) DATE												
FILE NOW: FEE IS \$61.25 9. Election C Due By May 1, 2008 Trust Fund					. –		\$5.00 May Be Added to Fees	Flor	lake Check ida Depar	tment of S	to State	
10.	OFFICERS AND DI	RECTORS		11.	·····	Ą	DDITIONS/CHANG	ES TO OFFIC	ERS AND DIF			
10.110	KING, SANDRA 1930 NW 5TH WAY POMPANO BEACH FL 33060		☐ Delete				02	U000008 /20/08-1	325102 80105-02	□ Change 22 70.00	Addition \	
TITLE. NAME STREET ADDRESS CITY-ST-ZIP	IVPR MOODY, MATTIE 2500 NW 30TH WAY FORT LAUDERDALE FL 33311		☐ Delate	1	l l			••••		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	THOMACITA, BRYANT 2840 NW 19TH STREET FORT LAUDERDALE FL 33311		Delah .	NAM STRE	E ET ADDRESS -ST-ZIP			~		Changa	□ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FSEC VANS, OLIVIA 1306 NW 15TH STREET FT LAUDERDALE FL		Delete							Change	Addition	

STREET ADDPESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZiP

1014

NAME

NAME

Delete

Delete

ULIA MCEIVY 2-7-08 7542349393 SIGNATURE:

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 617, 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.