

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728055

FILED
Jan 14, 2008
Secretary of State

Entity Name: BROWARD COUNTY ASSOCIATION OF THE DEAF, INC.

Current Principal Place of Business:

BROWARD ASSOC. OF THE DEAF
362 WEST SAMPLE ROAD
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

BROWARD ASSOC. OF THE DEAF
362 WEST SAMPLE ROAD
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 23-7326978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKHART, MICHAEL
362 WEST SAMPLE ROAD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOLOMON, LESLIE
Address: 12401 SUMMER SPRINGS DR
City-St-Zip: BOYNTON BEACH, FL 334372044 US

Title: VP () Delete
Name: OSHMAN, BETTY
Address: 7259 TONGA CT
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: T (X) Delete
Name: UDELSON, JOEL M
Address: 7023 PALAZZO REALE
City-St-Zip: BOYNTON BEACH, FL 334373739 US

Title: S () Delete
Name: LOCKHART, MICHAEL
Address: 5619 AINSLEY CT.
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: TR () Delete
Name: NIKOLAUS, HAROLD
Address: 7380 NW 18TH ST APT 101
City-St-Zip: MARGATE, FL 330636871 US

Title: TR (X) Delete
Name: LERNER, IRA
Address: 260 N.W. 76TH AVE APT: 208
City-St-Zip: MARGATE, FL 330634862 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: TENDRICH, DONALD
Address: 1401 NE MIAMI GARDENS DR #297
City-St-Zip: N MIAMI BEACH, FL 33179 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: LOCKHART, MICHAEL
Address: 5619 AINSLEY CT.
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: C (X) Change () Addition
Name: NIKOLAUS, ROSEMARY
Address: 7380 NW 18TH ST APT 101
City-St-Zip: MARGATE, FL 330636871 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LESLIE SOLOMON

P

01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date