2007 NOT-FOR-PROFIT CORPORATION

FILED Jan 08, 2007 8:00 am

ANNUAL REPORT								Secretary of State				
DOCUMENT # 752055 1. Entity Name SOUTH BROWARD BUSINESS COUNCIL, INC.									01-08-2007	•		
Principal Place of Business 4018 BUCHANAN ST HOLLYWOOD, FL 33021			P.0.	Mailing Address P.O. BOX 6091 HOLLYWOOD, FL 33021					10000			
2. Principal F	Place of Busin	ness - No P.O. Box #	3. Mailing Address						Live Control			
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01042007	Chg-NP	CR2E0	37 (12/06)	
City'& State			С	City & State				4. FEI Numbe 59-204			— — —	oplied For
Zip	Zip Country			Zip			Country		of Status Desire	d 🔲	\$8.75 Add	ditional
	6. Name	ed Agent	L			7. Name and	Address of Ne	w Registered				
STOODLEY, JAMES J												
4018 BUC	HANAN S	T		St			Address (P.O. Box Number is Not Acceptable)					
HOLLYWOOD, FL 33021												
					City					FL	Zip Cod	e
The above named entity submits this statement for the purpose of changing its registered office or registered the obligations of instanced page.								ed agent, or bot	h, in the State of			and accept
the obligations of registered agent.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	*****	OFFICERS AND	DIRECTORS	IRECTORS 11.				ADDITIONS/CH/	ANGES TO OFFI	CERS AND D	IRECTORS IN	1 10
NAME STREET ADDRESS CITY-SI-ZIP	PD STOODLEY, JAMES 4018 BUCHANAN ST HOLLYWOOD, FL 33021			☐ Defete		E Et address -st-zip	s				☐ Change	Addition
TITLE NAME STREET ADDRESS	DV SALTZ, MARK L 3501 GRIFFIN ROAD			☐ Delete	elete Title Name Stree						Change	Addition
CITY - ST - ZIP	FT LAUDERDALE, FL 33312					-SI-ZIP						
TITLE NAME	TD LEONARD, MALCOLM A			☐ Defete	Defete ITILE						Change	■ Addition
STREET ADDRESS	i i				STREE							
CITY-ST-ZIP	HOLLYWOOD, FL 33021			···.	CITY-S							
TITLE NAME	D GRANT, JAMES			☐ Delete	Delete TITLE NAME						Change	☐ Addition
STREET ADDRESS	DRESS 6109 PEMBROKE ROAD					ET ADDRESS						
CITY-SI-ZIP	HOLLYW	OOD, FL 33023			CITY	-ST-ZIP						
TITLE NAME	D HAVEL, TERRY			Delete	TITLE			CTOR Y LUNDY			Change	Addition
STREET ADDRESS	•			NAM Stre		E et address		DURLIS	ROAD			
CITY-ST-ZIP	_	OOD, FL 33021				-ST- ZIP		LAUDERD		33314	•	
TITLE	I −			☐ Delete TITLE							☐ Change	☐ Addition
NAME STREET ADDRESS		S, BRUCE A SCAYNE BLVD			NAME	ET ADDRESS						
CITY - ST - ZIP		RA, FL 33180				ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE SIGNATURE OF TYPED OF PRINTED PLANES J.