

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758409

FILED  
Feb 12, 2007  
Secretary of State

Entity Name: BROWARD 10-13 CLUB, INC.

**Current Principal Place of Business:**

1791 MEARS PKWY  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

1791 MEARS PKWY  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 59-2129658      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

OREFICE, FRANK J  
4071 NW 5TH ST  
COCONUT CREEK, FL 33066      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: BERKOWITZ, ALAN  
Address: 5313 NW 118 AVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: V      ( ) Delete  
Name: WEISER, LOUIS  
Address: 7765 YARDLY DR #201  
City-St-Zip: TAMARAC, FL 33321

Title: S      ( ) Delete  
Name: OSTROFSKY, WARREN  
Address: 1782 NW 97 AVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T      ( ) Delete  
Name: OREFICE, FRANK J  
Address: 4071 NW 5 ST  
City-St-Zip: COCONUT CREEK, FL 33066

Title: SATA      ( ) Delete  
Name: PUGLISI, THOMAS  
Address: 8101 NW 51 PL  
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: D      ( ) Delete  
Name: FARRELL, WILLIAM E  
Address: 435 NW 111 AVE  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK J. OREFICE

T

02/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date