

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 764382 (8)

1. Corporation Name

BROWARD PUBLIC LIBRARY FOUNDATION, INC.



Principal Place of Business

Mailing Address

100 SO ANDREWS AVE
FT LAUD FL 33301

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FT LAUD FL 33301

3. Date Incorporated or Qualified
08/05/1982

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country
24 25

28 Zip Country
29 30

4. FEI Number
59-2224746

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KARVEY, KAY
1500 BAY ROAD
MIAMI BCH FL 33139**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and state of residence)

(Null): Registered Agent signature required when re-appointing

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	<input checked="" type="checkbox"/> DELETE
NAME	DEARDEN, RALPH G	
STREET ADDRESS	1100 NW 55TH ST	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	CVD	<input type="checkbox"/> DELETE
NAME	DOMENICO, RALPH J.	
STREET ADDRESS	200 E. BROWARD BOULEVARD	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	LAMBERTUS, CHRISTINE L.	
STREET ADDRESS	2929 E. COMMERCIAL BLVD.	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	TOLL, CRAIG S.	
STREET ADDRESS	2153 NW 86TH AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	CVD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	GLOVER, ANTHONY	
53 STREET ADDRESS	777 American Expressway	
54 CITY-ST-ZIP	Plantation, FL 33337	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Executive Director

2/1/96

954-357-7469

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E037 (12/95)