

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001831

FILED  
Feb 08, 2006  
Secretary of State

Entity Name: BROWARD ON BROADWAY, INC.

**Current Principal Place of Business:**

2708 NW 108 TERRACE  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

2708 NW 108 TERRACE  
SUNRISE, FL 33322

**New Mailing Address:**

FEI Number: 65-1023384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINE, STEVEN T  
2708 NW 108 TERRACE  
SUNRISE, FL 33322 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: PD ( ) Delete  
Name: LEVINE, STEVEN T  
Address: 2708 N.W. 108 TERRACE  
City-St-Zip: SUNRISE, FL 33322

Title: VD ( ) Delete  
Name: FREDEBAUGH, DANA  
Address: 11000 S.W. 13 STREET  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: TD ( ) Delete  
Name: BLECKER, BARRET  
Address: 1300 GOLFVIEW DRIVE EAST  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SD (X) Delete  
Name: BERGER, LORI  
Address: 5180 SABAL PALM BLVD., APT. #125  
City-St-Zip: TAMARAC, FL 33319

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

Title: PD (X) Change ( ) Addition  
Name: LEVINE, STEVEN T  
Address: 2708 N.W. 108 TERRACE  
City-St-Zip: SUNRISE, FL 33322 US

Title: VD (X) Change ( ) Addition  
Name: FREDEBAUGH, DANA  
Address: 11000 S.W. 13 STREET  
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: SD (X) Change ( ) Addition  
Name: LEVINE, MERYL  
Address: 2708 NW 108 TERR  
City-St-Zip: SUNRISE, FL 33322 US

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: BARRET BLECKER

D

02/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date