## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # N05000004958**

Entity Name

MASTER BROKERS FORUM OF BROWARD COUNTY, INC.



FILED Apr 09, 2008 08:00 A Secretary of State

Principal Place of Business

JOHN BEAUCHAMP, INTERCOASTAL REALTY 1500 LAS OLAS BLVD

FORT LAUDERDALE, FL 33301

Mailing Address

JOHN BEAUCHAMP, INTERCOASTAL REALTY

1500 LAS OLAS BLVD

FORT LAUDERDALE, FL 33301



03252008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 16-1722004 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARCIA, MARIA T 1111 BRICKELL AVE STE #2150 MIAMI, FL 33131

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	named entity submits this statement for the plions of registered agent.	surpose of changing its registered of	office or re	agistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered Ap	ent signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financin     Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees	U00000889012
10.	OFFICERS AND DIRECTORS				04/22/08-80036-015 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELLERT, CAROLYN B 500 W CYPRESS CREEK RD #380 FORT LAUDERDALE, FL 33334				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEAGY, PHIL 777 SO FEDERAL HWY FORT LAUDERDALE, FL 33316				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SINGER, TIM 940 SE 17 ST CAUSEWAY FORT LAUDERDALE, FL 33316		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BEAUCHAMP, JOHN 1500 LAS OLAS BLVD FORT LAUDERDALE, FL 33301				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			_		
TITLE NAME STREET ADDRESS	Construction of the Constr			STORY STORY	;

12. I hereby certify that the information supplied with this fiting 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 africation of the corporation of the corporation

SIGNATURE

Neasur

4-7-08