# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 06, 2010**
**Secretary of State**

DOCUMENT# N14278

**Entity Name:** BROWARD HOMEBOUND PROGRAM, INC.

**Current Principal Place of Business:**

C/O NORTH BROWARD MEDICAL CENTER
201 E. SAMPLE RD.
DEERFIELD BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NORTH BROWARD MEDICAL CENTER
201 E. SAMPLE RD.
DEERFIELD BEACH, FL 33064

**New Mailing Address:**

**FEI Number: 59-2668389** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

ROSS, SHARON F ED
C/O NORTH BROWARD MEDICAL CTR
201 E SAMPLE RD
DEERFIELD BEACH, FL 33064 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: DVP
Name: MALCOLM, GAVIN
Address: 201 EAST SAMPLE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: D
Name: GERONEMUS, DIANN
Address: 833 NW 81 WAY
City-St-Zip: PLANTATION, FL 33324

Title: DP
Name: DELUCA, VINCENT
Address: 3323 W. COMMERCIAL BLVD, SUITE 114
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D
Name: SILVER, GAIL
Address: 6075 N.W. 41 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D
Name: COHEN, MARION
Address: LYNDHURST H 1012
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: DT
Name: GORDON, JASON
Address: 200 E. LAS OLAS BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

SIGNATURE: VINCENT DELUCA PRES 01/06/2010
Electronic Signature of Signing Officer or Director — Date