FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

FILED Feb 03 1998 8:00am Secretary of State

BROWARD WORKSHOP POLITICAL ACTION COMMITTEE, INC OPRPORATED										
Principal Place of Business Mailing Address							-	JABAH BUBUL BEBEH BUBUL	III	
% CARL L MAYHUE 625 N.E. 4TH ST P.O. BOX 2427 FT. LAUDERDALE FL 33301 US							3. Date Incorporated or Qualified 09/12/1986 4. FEI Number 59-2723155	Applied F		
2. Principal Place of Business 2a. Mailing Address 21			ress					\$8.75 Additional Fee Required		
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be		
City & Star	e	City & State					7. Is this nonprofit corporation a homeowners association?			
Zip 24	Country Zip		30	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curr	1					10. Name and Address of New Registered Ag		-	
				81	Nami	€				
MAYHUE, CARL L 625 NE 4TH ST				82	Stree	t Addres	ss (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33301				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.									tered red	
SIGNATURE										
	Signature, typed or printed name of registered a				nt signatu	re required	when reinstating) DATE			
12.		ND DIRECTORS	13				ADDITIONS/CHANGES TO OFFICERS AND D			
TITLE	DAT	ול 🛄		1 TITLE		-	L	Change Ac	ddition (
NAME	MAYHUE, CARL L.			2 NAME					2	
STREET ADDRESS	625 NE 4TH STREET				ADDRESS				μ̈́	
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL DVP	[] N		CITY-S	T- ZIP	+		Change Ac	dition C	
NAME	DUKE, DAVIS W JR			NAME			L	Tolkalige LTAC		
STREET ADDRESS	1700 E LAS OLAS BLVD #F)H_1	4		ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL	11-1		4 CITY - S						
TITLE	DT	DI DI		TITLE	11-211	1		Change	dition	
NAME	BANKS, WALTER			NAME			_	,		
STREET ADDRESS	1700 S. OCEAN LANE		3.3	STREET	ADDRESS	1				
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4	l, CITY-S	T-ZIP				ľ	
TITLE	DS	☐ DE	LETE 4.1	TITLE				Change Ad	Idition	
NAME	NOLAN, ANTHONY A.		4.4	2 NAME					ſ	
STREET ADDRESS	2321 WILTON DRIVE		4.3	STREET	ADDRESS					
CITY-SY-ZIP	FT. LAUDERDALE FL			cny-s	T- ZIP					
TITLE	☐ DELETE		LETE 5.1	5.1 TITLE				Change	idition	
NAME			5.2	NAME			-			
STREET ADDRESS			5.3	STREET .	address				-	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		CITY-\$1	Γ- Z/P					
गारम		∐ DE		TITLE			Ŀ	Change 🔲 Ad	ldition	
NAME			6.2	NAME						
STREET ADDRESS			6.3	STREET.	ADDRESS				i	
CITY-ST-ZIP	artify that the information graphlad			CITY-ST		<u> </u>	otion 110 07/9/// Enrich Statutes further conf.			

stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio signature shall have the same legal effect as if made under oath; that I am an t as required by Chapter 617, Florida Statutes; and that my name appears in

Jan.19, 1998 (954)764-6363