

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 17, 2008
Secretary of State

DOCUMENT# N32831

Entity Name: BROWARD FOLK CLUB, INC.**Current Principal Place of Business:**5705 SOUTH TRAVELERS PALM LANE
TAMARAC, FL 33319**New Principal Place of Business:**1750 NW 88TH WAY
CORAL SPRINGS, FL 33071**Current Mailing Address:**PO BOX 190084
LAUDERHILL, FL 33319**New Mailing Address:****FEI Number:** 65-0385238**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SINGER, ROBERT
5705 SOUTH TRAVELERS PALM LANE
TAMARAC, FL 33319 US**Name and Address of New Registered Agent:**LEIBOWITZ, NEIL
891 W TROPICAL WAY
PLANTATION, FL 33317 US

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: NEIL LEIBOWITZ

07/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SINGER, ROBERT
Address: 5705 SOUTH TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319 US

Title: T/D () Delete
Name: LEIBOWITZ, NEIL
Address: 891 WEST TROPICAL WAY
City-St-Zip: PLANTATION, FL 33317 US

Title: CS/D () Delete
Name: BOUMEL, ARLENE
Address: 1750 N.W. 88TH WAY
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: D () Delete
Name: BUKSTEL, ELLEN
Address: 14640 MUSTANG TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330 US

Title: D () Delete
Name: RUBEL, JANIS
Address: 405 N. OCEAN BLVD #1809
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP/D () Delete
Name: SUSAN, MOSS
Address: 1950 NW 106 AVE
City-St-Zip: PEMBROKE PINES, FL 33026 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: BOUMEL, ARLENE G
Address: 1750 NW 88TH WAY
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CS/D (X) Change () Addition
Name: WUERZBERGER, NANCY
Address: 140 NW 77TH WAY
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: D (X) Change () Addition
Name: CAMBEST, DAVID
Address: 3256 NW 113 AVE
City-St-Zip: SUNRISE, FL 33323 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP/D (X) Change () Addition
Name: JAMIE, SACULLO
Address: 4800 SW 76 AVE
City-St-Zip: DAVIE, FL 33328 US

I hereby certify that the information supplied with this filing does not qualify 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: NEIL LEIBOWITZ

T/D

07/17/2008

Electronic Signature of Signing Officer or Director

Date