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Feb 25 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N34581 (1)

1. Corporation Name

CULTURAL FOUNDATION OF BROWARD, INC.



Principal Place of Business

Mailing Address

100 SOUTH ANDREWS AVENUE  
FT. LAUDERDALE FL 33301-1830

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FT. LAUDERDALE FL 33301-1830

3. Date Incorporated or Qualified  
10/06/1989

3a. Date of Last Report  
02/27/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
65-0151424

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EMO CORPORATE SERVICES, INC.  
100 NE THIRD AVENUE  
SUITE 1100  
FT. LAUDERDALE FL 33301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  DELETE  
NAME LABONTE, RENEE  
STREET ADDRESS 3300 N. FEDERAL HWY #214  
CITY-ST-ZIP FORT LAUDERDALE FL 33306

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VD  DELETE  
NAME FOSTER, BRAD  
STREET ADDRESS 250 OCEANIC AVE  
CITY-ST-ZIP LAUDERDALE BY THE SEA FL

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE PD  DELETE  
NAME KURLAND, ROSLYN  
STREET ADDRESS 4400 N HILLS DR  
CITY-ST-ZIP HOLLYWOOD FL

3.1 TITLE Co-T  Change  Addition  
3.2 NAME PALIN, PETER  
3.3 STREET ADDRESS 1000 E. LAS OLAS BLVD.  
3.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33301

TITLE T  DELETE  
NAME MATTSON, BRUCE  
STREET ADDRESS 4901 NW 17 WAY, STE 303  
CITY-ST-ZIP FT. LAUDERDALE FL

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS 1900 GLADES ROAD #441  
4.4 CITY-ST-ZIP BOCA RATON, FL 33331

TITLE VD  DELETE  
NAME REIDEL, MARY 2  
STREET ADDRESS 200 E. LAS OLAS BLVD.  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE SD  DELETE  
NAME DEARDEN, PAMELLA  
STREET ADDRESS 2957 NW 12 AVENUE  
CITY-ST-ZIP FORT LAUDERDALE FL 33311

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Bruce H Mattson*  
BRUCE H MATTSON Treasurer

2/18/97

(561) 362-8300

CR2E037 (9/96)