

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 PM 1:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N36310** (3)  
1. Corporation Name  
**METRO BROWARD ECONOMIC DEVELOPMENT CORPORATION I  
NC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
1100 W STATE ROAD 84 FT. LAUDERDALE FL 33315 1100 W STATE ROAD 84 FT. LAUDERDALE FL 33315

3. Date Incorporated or Qualified <b>01/22/1990</b>	3a. Date of Last Report <b>05/01/1994</b>
4. FEI Number <b>65-0200546</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
24 Zip	25 County
29 Zip	30 County

9. Name and Address of Current Registered Agent  
**THOMAS, ALDWYN C.  
1100 W. STATE ROAD 84  
FT. LAUDERDALE FL 33315**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL
Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when nonattorney)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	GAGNON, ROLAND
STREET ADDRESS	1 FINANCIAL PZ
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	TD
NAME	TURNER, LEE
STREET ADDRESS	2001 HOLLYWOOD BLVD.
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	P
NAME	THOMAS, ALDWYN
STREET ADDRESS	1100 W STATE RD 84
CITY - ST - ZIP	FT LAUDERDALE FL
TITLE	D
NAME	ASH, ANTHONY
STREET ADDRESS	600 SE 3 AVE
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	DVC
NAME	CLUTTER, MICHAEL
STREET ADDRESS	ONE E. BROWARD BLVD.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	D
NAME	SHUMAN MARTHA
STREET ADDRESS	ONE FINANCIAL PLAZA
CITY - ST - ZIP	FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DVC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	COONEY, STEPHEN	
1.3 STREET ADDRESS	200 EAST BROWARD BLVD.	
1.4 CITY - ST - ZIP	FT. LAUDERDALE FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statutes. I further certify that the information included 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, unchanged, or in an attachment with an address.

SIGNATURE: **Aldwyn C. Thomas**  
President/CEO  
Date: **April 28, 1995** Telephone: **(305)463-3153**