

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N44217

Entity Name: BROWARD COUNTY COMMISSION GOVERNMENTAL LEASING CORPORATION

Current Principal Place of Business:

115 S ANDREWS AVE.
GOVERNMENT CENTER, S-423
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

115 S ANDREWS AVE.
GOV'T CTR, STE #513
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-0276964 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HELLER, MELISSA P
FINANCE & ADMIN SVS DEPT, ROOM 513
115 S. ANDREWS AVE
FORT LAUDERDALE, FL 33301 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: D () Delete
Name: RITTER, STACY
Address: 7711 SALEM LANE
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: LIEBERMAN, ILENE
Address: 4809 WOODLANDS BLVD.
City-St-Zip: TAMARC, FL 33319

Title: D () Delete
Name: KEECHEL, KEN
Address: 2601 NE 37TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: GUNZBURGER, SUZANNE N.
Address: 803 N. SOUTHLAKE DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: RODSTROM, JOHN E.
Address: 66 NURMI DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: WASSERMAN-RUBIN, DIANA
Address: 5731 SW 196 LANE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: MELISSA HELLER

MS.

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date