

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004611

FILED
May 15, 2006
Secretary of State

Entity Name: HUMAN RESOURCE ASSOCIATION OF BROWARD COUNTY, INC.

Current Principal Place of Business:

PO BOX 9623
FT LAUDERDALE, FL 33310

New Principal Place of Business:

Current Mailing Address:

PO BOX 9623
FT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-0319346 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REGAN, CHRSTIAN
1525 NW 3RD ST.
STE. 21
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

SAPIR, GARY
10779 SEA CLIFF CIRCLE
BOCA RATON, FL 33498 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: GARY SAPIR

05/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRAGER, BARBARA
Address: 9050 PINES BLVD., #200
City-St-Zip: PEMBROKE PINES, FL 33024

Title: V () Delete
Name: SAPIR, GARY
Address: 10779 SEACLIFF CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: T () Delete
Name: FINNEGAN, ANN
Address: 2500 QUANTUM LAKES DR #108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: S () Delete
Name: SMOLEN, DEBORAH
Address: 3050 N FEDERAL HIGHWAY
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: V (X) Delete
Name: REGAN, CHRISTIAN
Address: 1525 NW 3RD ST., STE. 21
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAPIR, GARY
Address: 10779 SEA CLIFF CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: V (X) Change () Addition
Name: FLYNN, BARBARA
Address: 8200 W. SUNRISE BLVD.
City-St-Zip: PLANTATION, FL 33322

Title: S (X) Change () Addition
Name: NEVILS, KRISTEN
Address: 9430 LIVE OAK PLACE
City-St-Zip: FT. LAUDERDALE, FL 33324

Title: T (X) Change () Addition
Name: GLASGAL, LORI
Address: 17130 S.W. 49TH PLACE
City-St-Zip: MIRAMAR, FL 33027

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY SAPIR

P

05/15/2006

Electronic Signature of Signing Officer or Director

Date