

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002526

FILED
Apr 26, 2011
Secretary of State

Entity Name: BROWARD TRUST FOR HISTORIC PRESERVATION, INC.

Current Principal Place of Business:

1350 EAST SUNRISE BLVD
#122
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1060
FORT LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 65-0596154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTORINO, DIANA
1230 SE 4TH AVE.
FORT LAUDERDALE, FL 33316 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: PD
Name: SMART, DIANE G
Address: 3850 GALT OCEAN DR. #711
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D
Name: GILLIS, SUSAN
Address: 902 NE 37TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD
Name: KIMBERLIN, SUSAN
Address: 119 NE 19TH COURT, #217
City-St-Zip: WILTON MANORS, FL 33305

Title: TD
Name: HOWARD, WILLIAM
Address: 1170 N FEDERAL HIGHWAY #304
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D
Name: WHITE, JAMES
Address: 200 EAST BROWARD BLVD., STE. 1900
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D
Name: LOEWENSTEIN, ESTELLE
Address: 1201 SOUTH OCEAN DRIVE, #1605
City-St-Zip: HOLLYWOOD, FL 33019

I hereby 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 all other like empowered.

SIGNATURE: SUSAN KIMBERLIN

SECR

04/26/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date