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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # N97000002460 (0)

1. Corporation Name
BROWARD COUNTY PARENT SUPPORT GROUP, INC.

Principal Place of Business	Mailing Address
990 NW 47 ST. FT. LAUDERDALE FL 33309 (delete)	990 NW 47 ST. FT. LAUDERDALE FL 33309 (delete)

3. Date Incorporated or Qualified: 04/30/1997

4. FEI Number: 65-0754631 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 11950 NW 27 St.	26 11950 NW 27 Street
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Plantation, FL	City & State 28 Plantation, FL
Zip / Country 24 33323 / 25 Broward	Zip / Country 29 33323 / 30 Broward

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CHANCEY, DAVID 990 NW 47 ST. FT. LAUDERDALE FL 33309	81 Name: RON ADAMS 82 Street Address (P.O. Box Number is Not Acceptable): 11950 NW 27 ST 83 84 City: PLANTATION FL 85 Zip Code: 33323

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: Ronald A. Adams — 4-17-98
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHANCEY, DAVID 990 NW 47 ST. FT. LAUDERDALE FL 33309	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Maureen Calderara 10873 NW 7 Street Coral Springs, FL 33071	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHANCEY, SHARON 990 NW 47 ST. FT. LAUDERDALE FL 33309	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Joan Gladfelter 10898 NW 23 Court Sunrise, FL 33323	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ADAMS, CHERYL 11950 NW 27TH ST. PLANTATION FL 33323	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Shirley Hartford 2539 Taylor Street Hollywood, FL 33020	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUCHER, CHRISTINE 7780 NW 39TH ST. HOLLYWOOD FL 33024	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Ron ADAMS 11950 NW 27 ST PLANTATION, FL 33323	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MASON, RENEE 1137 SW 5TH PL. FT. LAUDERDALE FL 33312	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LYON, JAN 658 WOODGATE LN. SUNRISE FL 33326	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/97)

14. I 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: [signature] 4-17-98 954-425-1002