2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002460

FILED Aug 30, 2004 Secretary of State

Entity Name: BROWARD COUNTY HOMESCHOOL PARENT SUPPORT GROUP, INC.

Current Principal Place of Business: 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 US 10971 NW 38 CT. CORAL SPRINGS, FL 33065 10971 NW 38 CT.							
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10971 NW 38 CT. CORAL SPRINGS, FL 33065 US FEI Number: 65-0754631 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: VALERIO, CHERYL 10971 NW 38 CT. CORAL SPRINGS, FL 33065 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, n the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: SD () Delete Title: () Change () Addition Name: Address: 1321 NW 75 TER. Address: 221 NW 75 TER. Address: 1321 NW 75 TER. Address: 241 NW 24 CT. Address: 241 NW 24 CT. Address: 241 NW 24 CT.			US	9241 NW 24 SUNRISE, I	4 COURT FL 33322	US	
SUNRISE, FL 33022 US FEI Number: 65-0754631 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VALERIO, CHERYL 10971 NW 38 CT. CORAL SPRINGS, FL 33065 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	Current Ma	ailing Address:		New Mailin	New Mailing Address:		
Name and Address of Current Registered Agent: VALERIO, CHERYL 10971 NW 38 CT. CORAL SPRINGS, FL 33065 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, n the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: SD () Delete Title: () Change () Addition Name: Address: () City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: () Change () Addition Name: () Change: () Change () Addition Name: () Change: () Chang			US			US	
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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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Fitle: SD () Delete Title: () Change () Addition Name: POND, SHELLY Name: POND, SHELLY Address: 1321 NW 75 TER. City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313 Fitle: VD () Delete Title: () Change () Addition Name: FIFELSKI, KELLY Name: FIFELSKI, KELLY Name: POND, SHELLY Name: Address: 9241 NW 24 CT. Address: 9241 NW 24 CT.	Name and	Address of Curren	t Registered Agent:	Name and	Address of I	New Registered Agent:	
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: SD () Delete Title: () Change () Addition Name: Address: 1321 NW 75 TER. Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: Address: Title: () Change () Addition Name: Address: Address: 9241 NW 24 CT.	10971 NŴ CORAL SP The above	38 CT. PRINGS, FL 33065 named entity submit	s this statement for the purpo	se of changing it	s registered (office or registered agent, or both,	
ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: SD () Delete Title: () Change () Addition Name: POND, SHELLY Name: Address: 1321 NW 75 TER. Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: Address: 9241 NW 24 CT.							
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	Name: Nddress:	FIFELSKI, KÈLLY 9241 NW 24 CT.		Name: Address:	() Change () Addition	
Fitle: PD () Delete Title: () Change () Addition Name: VALERIO, CHERYL Name: Address: 10971 NW 38TH CT Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip:	Name: Nddress:	VALERIO, CHÉRYL 10971 NW 38TH CT		Name: Address:	() Change () Addition	
Title: TD () Delete Title: () Change () Addition Name: HOTTEL, LINDA Name: Address: 2311 NE 47 ST. Address: City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip:	Name: Nddress:	HOTTEL, LINDA 2311 NE 47 ST.		Name: Address:	() Change ()Addition	
Title: D () Delete Title: D (X) Change () Addition Name: KERNOHAN, MARTHA Name: CASSIDY, JO ANNE Address: 1215 LINCOLN ST. Address: 5401 SW 164 TERRACE City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: SOUTHWEST RANCHES, FL 33331	Name: Nddress:	KERNOHAN, MARTHA 1215 LINCOLN ST.	019	Name: Address:	CASSIDY, JO 2 5401 SW 164	ÁNNE TERRACE	
Fitle: () Delete Title: D () Change (X) Addition Name: Name: DE KLAVON, DONNA Address: Address: 1840 NW 105 TERRACE City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33026	Name: ∖ddress:	() Delete		Name: Address:	DE KLAVON, E 1840 NW 105	DONNA TERRACE	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHERYL VALERIO PD 08/30/2004