

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 05, 2005**  
**Secretary of State**

DOCUMENT# N98000003369

Entity Name: BROWARD COUNTY CHAMBER OF COMMERCE. INC.

**Current Principal Place of Business:**

3045 N. FEDERAL HIGHWAY  
SUITE 60  
FT. LAUDERDALE, FL 33306

**New Principal Place of Business:**

8201 N UNIVERSITY DR.  
BANKATLANTIC BLDG. 2ND FL.  
TAMARAC, FL 33321

**Current Mailing Address:**

3045 N. FEDERAL HIGHWAY  
SUITE 60  
FT. LAUDERDALE, FL 33306

**New Mailing Address:**

8201 N UNIVERSITY DR  
BANKATLANTIC BLDG. 2ND FL  
TAMARAC, FL 33321

FEI Number: 65-0841822

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMS, LEVI G JR  
FERTIG & GRAMLING  
200 S.E. 13TH STREET  
FT 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 ( ) Delete  
Name: ZOLNOWSKI, LAWRENCE A  
Address: 7050 SOUTHWEST 20TH STREET  
City-St-Zip: FT LAUDERDALE, FL 33317

Title: STD ( ) Delete  
Name: ZOLNOWSKI, TERESA E  
Address: 7050 SOUTHWEST 20TH STREET  
City-St-Zip: FT LAUDERDALE, FL 33317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: LAWRENCE ZOLNOWSKI

PRES

04/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date