

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2008  
Secretary of State**

DOCUMENT# N98000003369

Entity Name: BROWARD COUNTY CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

1640 WEST OAKLAND PARK BLVD  
SUITE 403  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

1640 WEST OAKLAND PARK BLVD  
SUITE 403  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

FEI Number: 65-0841822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**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: 2000 BEVERLY POINT RD.  
City-St-Zip: LEESBURG, FL 34748

Title: STD ( ) Delete  
Name: ZOLNOWSKI, TERESA E  
Address: 2000 BEVERLY POINT RD.  
City-St-Zip: LEESBURG, FL 34748

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title: D ( ) Change (X) Addition  
Name: OTERO, AL  
Address: 551 NW 205 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: D ( ) Change (X) Addition  
Name: DUPREE, MARTHENIA DR.  
Address: PO BOX 9906  
City-St-Zip: FORT LAUDERDALE, FL 33310 US

Title: D ( ) Change (X) Addition  
Name: SMITH, C. LON  
Address: PO BOX 9583  
City-St-Zip: FORT LAUDERDALE, FL 33310 US

Title: D ( ) Change (X) Addition  
Name: KENNEDY, TIMOTHY J  
Address: PO BOX 5201  
City-St-Zip: FORT LAUDERDALE, FL 33310

I hereby certify that the information supplied with this filing does not qualify 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: LAWRENCE ZOLNOWSKI

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date