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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **752055** (4)

1. Corporation Name

SOUTH BROWARD BUSINESS COUNCIL, INC.

Principal Place of Business

Mailing Address

**4313 HOLLYWOOD BLVD. #208
P.O. BOX 6091
HOLLYWOOD FL 33021**

**P.O. BOX 6091
HOLLYWOOD FL 33081**



3. Date Incorporated or Qualified

04/16/1980

4. FEI Number

59-2040572

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

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

**LEONARD, MALCOLM A CPA
3810 HOLLYWOOD BLVD
HOLLYWOOD FL 33021**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD STENGEL, JOHN**
STREET ADDRESS **2099 JACKSON ST**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **D SARHAN, DONNA**
STREET ADDRESS **3407 S STATE RD 7**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **D LUNDY, ANTHONY**
STREET ADDRESS **3350 BURRIS ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME **D GILCHRIST, RAE**
STREET ADDRESS **468 HOLLYWOOD BLVD**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **TD LEONARD, MAL**
STREET ADDRESS **3810 HOLLYWOOD BLVD**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **D SARHAN, EDWARD**
STREET ADDRESS **3407 S. STATE ROAD 7**
CITY-ST-ZIP **HOLLYWOOD FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME **JIM GRANT**
STREET ADDRESS **6109 Pembroke Rd**
CITY-ST-ZIP **Hollywood, FL**

2.1 TITLE ☒ Change ☐ Addition

NAME **Terry Havel**
STREET ADDRESS **5754 Johnson St**
CITY-ST-ZIP **Hollywood, FL**

3.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

NAME **James Stoodley**
STREET ADDRESS **P.O. Box 81-7237**
CITY-ST-ZIP **Hollywood, FL**

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:

JIM GRANT

2/3/98

CP2E037 (10/97)