## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006577

FILED Mar 10, 2004 Secretary of State

Entity Name: BROWARD COUNTY FIREFIGHTERS CHARITIES, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
SUTIE 104	T STATE ROA DERDALE, FL				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
SUTIE 104	T STATE ROA DERDALE, FL				
FEI Number:	65-0961334	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
SUTIE 104 FORT LAU	T STATE ROA DERDALE, FL	. 33312	urpose of changing its registe	red office or registered agent, or both,	
in the State					
SIGNATUR					
	Electron	ic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TRUS () CLOUGHERTY, 12791 150TH C JUPITER, FL 3	OURT NORTH	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TREA () BERKOWITZ, A 108 CAMERON WESTON, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CH () DIX, WALTER 3760 FALCON I WESTON, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () CLOUGHERTY, 12791 150TH C JUPITER, FL 3	OURT NORTH	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ERDMAN, DAVI	IVER CANAL RD. #218	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TRUS () WILLIAMS, KEV 2650 S.W. 51S' FT. LAUDERDA	T COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: WALTER J. DIX PRES 03/10/2004