2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004554

Feb 14, 2005 Secretary of State

FILED

Entity Name: BROWARD WOMEN'S ALLIANCE, INC.

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 1463

FORT LAUDERDALE, FL 33302 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1463

FORT LAUDERDALE, FL 33302 US

FEI Number: 65-0522756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BELLOWS, NADINE F VOGEL, DEBRA

13794 NW 4 ST, STE 203 501 E. LAS OLAS BLVD

FORT LAUDERDALE, FL 33325 US FORT LAUDERDALE, FL 33301 US

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: DEBRA VOGEL 02/14/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VP () Delete Title: PRES (X) Change () Addition

 Name:
 VOGEL, DEBRA
 Name:
 VOGEL, DEBRA

 Address:
 501 E. LAS OLAS BLVD
 Address:
 501 E. LAS OLAS BLVD

 City-St-Zip:
 FORT LAUDERDALE, FL 33301
 City-St-Zip:
 FORT LAUDERDALE, FL 33301

Title: PD () Delete Title: VP (X) Change () Addition Name: BELLOWS, NADINE Name: O'CONNOR, EILEEN

Address: 8030 PETERS ROAD, SUITE D-103 Address: 201 SE SIXTH STREET

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TREA () Delete Title: TREA (X) Change () Addition

 Name:
 GROSS, MYRA
 Name:
 THROWER, CHRISTINE

 Address:
 956 MOCKINGBIRD LANE, SUITE 305
 Address:
 1612 SW 18TH AVENUE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 FORT LAUDERDALE, FL 33312

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: DEBRA VOGEL PRES 02/14/2005