

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90204 039 ****61.25

DOCUMENT # 739286

1. Entity Name
THE GENEALOGICAL SOCIETY OF BROWARD COUNTY, INC.



Principal Place of Business
**1420 S.E. 10TH ST
DEERFIELD BEACH, FL 33441 US**

Mailing Address
**PO BOX 485
FORT LAUDERDALE, FL 33323 US**

2. Principal Place of Business - No P.O. Box #

11950 NW 30 PL

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUNRISE FL

City & State

Zip

33323

Country

US

Zip

Country

02192008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-1744388

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCKEON, PATRICIA A
1420 S.E. 10TH ST
DEERFIELD BEACH, FL 33441**

7. Name and Address of New Registered Agent

Name **Adelaide Judy Austin**

Street Address (P.O. Box Number is Not Acceptable)
11950 NW 30 PL

City **Sunrise**

FL

Zip Code

33323

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Adelaide Judy Austin Treasurer

2/

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to:
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME **AUSTIN, ADELAIDE JUDY**
STREET ADDRESS **11950 NW 30 PLACE**
CITY-ST-ZIP **SUNRISE, FL 33323**

TITLE ☒ Delete
NAME **MAUTNER, SANDRA**
STREET ADDRESS **119 TIDDLE CIR**
CITY-ST-ZIP **JONESBOROUGH, TN 37659**

TITLE ☐ Delete
NAME **MCKEON, PATRICIA**
STREET ADDRESS **1420 SE 10TH ST**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33441**

TITLE ☒ Delete
NAME **FLETCHER, VIRGINIA**
STREET ADDRESS **721 NW 73 AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33317**

TITLE ☐ Delete
NAME **SAVAGE, EVE**
STREET ADDRESS **252 SW 61 AVE**
CITY-ST-ZIP **PLANTATION, FL 33317**

TITLE ☐ Delete
NAME **DI PETRILLO, BARBARA**
STREET ADDRESS **7506 PINEWALK DR SO**
CITY-ST-ZIP **MARGATE, FL 33063**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Robert Savage**
STREET ADDRESS **252 SW 61 AVE**
CITY-ST-ZIP **Plantation FL 33317**

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **NANCY Adams**
STREET ADDRESS **2380 NE 14 ST. Apt 213**
CITY-ST-ZIP **Pompano Beach FL 33062**

TITLE ☒ Change ☐ Addition
NAME **P**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Adelaide Judy Austin **Adelaide Judy Austin**

2/29/08

Date

954-907-0121 (cell)

Daytime Phone #

Also for Genealogical Society of Broward County

Title D

Ann Dooley

608 First Key Dr

Ft. Lauderdale FL 33304

ATTACHMENT

40037186

739286