

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009560

FILED
Apr 08, 2010
Secretary of State

Entity Name: BROWARD CARES FOR KIDS FOUNDATION, INC.

Current Principal Place of Business:

313 NORTH STATE ROAD 7
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

313 NORTH STATE ROAD 7
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 20-2273948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDNET, INC
313 NORTH STATE ROAD 7
PLANTATION, FL 33317 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: D
Name: SMITH-TORRES, SILVIA
Address: 313 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

Title: D
Name: BAKALAR, HOWARD
Address: 313 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

Title: D
Name: EPSTEIN, JOSEPH A C
Address: 313 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

Title: D
Name: GAETA, LISA S
Address: 313 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

Title: D
Name: ADELSON, DR. JENNIFER
Address: 313 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH A. EPSTEIN

CHAI

04/08/2010

Electronic Signature of Signing Officer or Director

Date