

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739286

Entity Name: THE GENEALOGICAL SOCIETY OF BROWARD COUNTY, INC.**Current Principal Place of Business:**2050 EXETER C
BOCA RATON, FL 33434**Current Mailing Address:**2050 EXETER C
BOCA RATON, FL 33434 US**FEI Number: 59-1744388****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HANES, CAROLYN A
2050 EXETER C
BOCA RATON, FL 33434 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:** CAROLYN A HANES

01/10/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DIRECTOR
Name LARSON, BARB
Address 1304 AVOCADO ISLE
City-State-Zip: FT. LAUDERDALE FL 33315Title PRESIDENT
Name MCKENNEY, DIANA L
Address 8949 SW 52ND PLACE
City-State-Zip: COOPER CITY FL 33328Title VP
Name STEVENS, ROBERT A
Address 1323 S. SHERMAN ST.
City-State-Zip: LONGMONT CO 80501Title DIRECTOR
Name TURIN, MIMI V
Address 4381 SW 100 TERRACE
City-State-Zip: DAVIE FL 33328Title TREASURER
Name HANES, CAROLYN A
Address 2050 EXETER C
City-State-Zip: BOCA RATON FL 33434Title DIRECTOR
Name KING, DIANE
Address 3031 OLD ORCHARD RD
City-State-Zip: DAVIE FL 33328Title SECRETARY
Name SHAFFNER, PAMELA
Address 2127 TANBARK LANE
City-State-Zip: FORT LAUDERDALE FL 33312

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: CAROLYN HANES

TREASURER

01/10/2022

Electronic Signature of Signing Officer/Director Detail

Date