

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739286

Entity Name: THE GENEALOGICAL SOCIETY OF BROWARD COUNTY, INC.**Current Principal Place of Business:**4250 GALT OCEAN DRIVE
6N
FORT LAUDERDALE, FL 33308**Current Mailing Address:**PO BOX 290661
DAVIE, FL 33329-0661 US**FEI Number: 59-1744388****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**YOUMANS, SHARON Y
4250 GALT OCEAN DRIVE
6N
FORT LAUDERDALE, FL 33308 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:** SHARON Y YOUMANS

01/17/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name TARPY, PAT
Address 7623 SOUTHAMPTON TERRACE
210
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name ADAMS, NANCY
Address 2880 NE 14 STREET
213
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER
Name YOUMANS, SHARON Y
Address 4250 GALT OCEAN DRIVE
6N
City-State-Zip: FORT LAUDERDALE FL 33308

Title SECRETARY
Name MCKENNEY, DIANA L
Address 8949 SW 52ND PLACE
City-State-Zip: COOPER CITY FL 33328

Title PRESIDENT
Name FEARER, MARK
Address 4809 NW 49TH RD
City-State-Zip: TAMARAC FL 33319

Title DIRECTOR/WEBMASTER
Name GLOVER, DOUGLAS
Address 8635 SW 1ST PLACE
City-State-Zip: CORAL SPRINGS FL 33071

Title VP
Name GADSON, CARNELL
Address 3121 NW 43RD PLACE
City-State-Zip: OAKLAND PARK FL 33309

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: SHARON Y YOUMANS

TREASURER

01/17/2018

Electronic Signature of Signing Officer/Director Detail

Date