

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739286

**Entity Name:** THE GENEALOGICAL SOCIETY OF BROWARD COUNTY, INC.**Current Principal Place of Business:**2141 NW 67TH AVE  
SUNRISE, FL 33313**Current Mailing Address:**2141 NW 67TH AVE  
SUNRISE, FL 33313 US**FEI Number: 59-1744388****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REEP, JAMES W.  
2141 NW 67TH AVE  
SUNRISE, FL 33313 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****02/17/2019**

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 ARMBRISTER, TAMIKO  
Address 3165 VISTA DEL MAR  
City-State-Zip: MARGATE FL 33063

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

Title TREASURER  
Name REEP, JAMES W.  
Address 2141 NW 67TH AVE  
City-State-Zip: SUNRISE FL 33313

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

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

Title SECRETARY  
Name HANES, CAROLYN  
Address 2050 EXETER C  
City-State-Zip: BOCA RATON FL 33434

*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: JAMES W REEP****TREASURER****02/17/2019**

Electronic Signature of Signing Officer/Director Detail

Date