

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006884

**FILED**  
**Feb 27, 2015**  
**Secretary of State**  
**CC2248771698**

**Entity Name:** FUNDING ARTS BROWARD, INC.

**Current Principal Place of Business:**

401 EAST LAS OLAS BLVD., STE. 2200  
FT. LAUDERDALE, FL 33301

**Current Mailing Address:**

401 EAST LAS OLAS BLVD., STE. 2200  
FT. LAUDERDALE, FL 33301

**FEI Number:** 20-0151317

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HORVITZ, FRANCIE J  
117 N.E. 2 ST.  
FT. LAUDERDALE, FL 33301 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name RUBENSTEIN, DRAZIA  
Address 401 EAST LAS OLAS BLVD, STE. 2200  
City-State-Zip: FORT LAUDERDALE FL 33301

Title D  
Name MILLS, JAYNE  
Address 401 EAST LAS OLAS BLVD, STE. 2200  
City-State-Zip: FORT LAUDERDALE FL 33301

Title D  
Name OLEFSON, JESSICA  
Address 401 EAST LAS OLAS BLVD., STE. 2200  
City-State-Zip: FT. LAUDERDALE FL 33301

Title D  
Name KASHDIN, CINDY  
Address 401 EAST LAS OLAS BLVD, STE. 2200  
City-State-Zip: FORT LAUDERDALE FL 33301

*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:** CINDY KASHDIN

**TREASURER**

**02/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date