

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009560

**Entity Name:** BROWARD CARES FOR KIDS FOUNDATION, INC.**Current Principal Place of Business:**1100 W MCNAB ROAD  
FORT LAUDERDALE, FL 33309**Current Mailing Address:**1100 W MCNAB ROAD  
FORT LAUDERDALE, FL 33309 US**FEI Number:** 20-2273948**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCAWLEY, SIGRID CHAIR  
1100 W MCNAB ROAD  
FORT LAUDERDALE, FL 33309 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:** SIGRID MCCAWLEY

02/03/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name MCCAWLEY, SIGRID  
Address 1100 W MCNAB ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name MCDERMOTT, LISA  
Address 1100 W MCNAB ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name AKITI, MELIDA  
Address 1100 W MCNAB ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name ANDERSON, NICHOLE  
Address 1100 W MCNAB ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name MARMION, SARAH  
Address 1100 W MCNAB ROAD  
City-State-Zip: FORT LAUDERDALE 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:** SIGRID MCCAWLEY

CHAIRMAN

02/03/2017

Electronic Signature of Signing Officer/Director Detail

Date