

2018 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

04/11/2018

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

04/11/2018

Electronic Signature of Signing Officer/Director Detail

Date