

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009560

**Entity Name:** BROWARD CARES FOR KIDS FOUNDATION, INC.

**Current Principal Place of Business:**

313 NORTH STATE ROAD 7  
PLANTATION, FL 33317

**Current Mailing Address:**

313 NORTH STATE ROAD 7  
PLANTATION, FL 33317 US

**FEI Number:** 20-2273948

**Certificate of Status Desired:** No

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

EPSTEIN, JOSEPH CHAIR  
313 NORTH STATE ROAD 7  
PLANTATION, FL 33317 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 SMITH-TORRES, SILVIA  
Address 313 NORTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title D  
Name BAKALAR, HOWARD  
Address 313 NORTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title D  
Name EPSTEIN, JOSEPH AC  
Address 313 NORTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title D  
Name ADELSON, DR. JENNIFER S  
Address 313 NORTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

*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:** JOSEPH EPSTEIN

**BOARD CHAIR**

**04/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date