

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000005751

Entity Name: BROWARD BEEKEEPERS ASSOCIATION, INC.**Current Principal Place of Business:**JEFF CRISSEY
11210 SW 49TH PL
DAVIE, FL 33330**Current Mailing Address:**PO BOX 824713
PEMBROKE PINES, FL 33082 US**FEI Number: 47-4570558****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CRISSEY, JEFF
JEFF CRISSEY
11210 SW 49TH PLACE
DAVIE, FL 33330 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:** JEFF CRISSEY**03/19/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT, DIRECTOR
Name CRISSEY, JEFF
Address 11210 SW 49TH PL
City-State-Zip: DAVIE FL 33330Title SECRETARY/DIRECTOR
Name FIELD, RICHARD
Address 6961 NW 82ND ST
City-State-Zip: TAMARAC FL 33321Title DIRECTOR
Name LEHR, SIDNEY
Address 7569 MARTINIQUE BLVD
City-State-Zip: BOCA RATON FL 33433Title VP/DIRECTOR
Name MARTINEZ, JILL
Address 5520 SW 58TH COURT
City-State-Zip: DAVIE FL 33314Title TREASURER/DIRECTOR
Name WELLNITZ, FRANK R
Address 16326 ERIE PL
City-State-Zip: DAVIE FL 33331

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: FRANK WELLNITZ**TREASURER/DIRECTOR****03/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date