#### **2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000009288

Entity Name: BROWARD WOMEN'S ALLIANCE FOUNDATION, INC.

FILED
Apr 10, 2018
Secretary of State
CC0914478002

## **Current Principal Place of Business:**

1067 SW 158 WAY

PEMBROKE PINES, FL 33027

### **Current Mailing Address:**

PO BOX 826631

PEMBROKE PINES. FL 33082 US

FEI Number: 35-2615017 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MOODY, HOLLY EAKIN 2900 E. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33306 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 PRES Title VP

Name PLUCIENKOWSKI, DIANA Name ZEILER, PAT

Address 4179 DAVIE ROAD Address 721 NW 2 STREET

City-State-Zip: FT. LAUDERDALE FL 33314 City-State-Zip: FT. LAUDERDALE FL 33311

Title DIR Title T

Name MOODY, HOLLY Name THE HONORABLE MICHELE TOWBIN

Title

SINGER

DIR

Address 2900 E. OAKLAND PARK BLVD. Address 201 SE 6TH STREET

City-State-Zip: FT. LAUDERDALE FL 33306 City-State-Zip: FT. LAUDERDALE FL 33301

Title S

Name FAZIO, VIVIAN Name KRUEGER PRINTZ, JILLIAN

Address 633 S. ANDREWS AVE. SUITE 201 Address 1543 SW 14TH STREET

City-State-Zip: FT. LAUDERDALE FL 33301 City-State-Zip: FT. LAUDERDALE FL 33316

Title VP Title VP

Name TSAKANIKAS, ANDREA Name MILROY, MELISSA

Address 2501 E. COMMERCIAL BLVD. #203 Address 2414 E. SUNRISE BLVD.

City-State-Zip: FT. LAUDERDALE FL 33308 City-State-Zip: FT. LAUDERDALE FL 33304

## Continues on page 2

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: DIANA L. PLUCIENKOWSKI PRES. 04/10/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIR Title DIR

NameSTONE, ELISANameTRACY, CARROLLAddress733 BREAKERS AVE.Address2331 WILTON DR.

City-State-Zip: FT. LAUDERDALE FL 33304 City-State-Zip: WILTON MANORS FL 33305