

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32831

Entity Name: BROWARD FOLK CLUB, INC.**Current Principal Place of Business:**891 W TROPICAL WAY
PLANTATION, FL 33317**Current Mailing Address:**POB 190084
LAUDERHILL, FL 33319 US**FEI Number:** 65-0385238**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEIBOWITZ, NEIL
891 W TROPICAL WAY
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 VP, DIRECTOR
Name SINGER, ROBERT
Address 5705 S. TRAVELERS PALM LANE
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name FELDMAN, BRUCE
Address 9301 LIME BAY BOULEVARD #105
City-State-Zip: TAMARAC FL 33321

Title TREASURER, DIRECTOR
Name LEIBOWITZ, NEIL
Address 891 W TROPICAL WAY
City-State-Zip: PLANTATION FL 33317

Title SECRETARY, DIRECTOR
Name WUNDERLICH, BILL
Address 7565 NW 125TH WAY
City-State-Zip: PARKLAND FL 33076

Title PRESIDENT, DIRECTOR
Name BOUMEL, ARLENE
Address 1750 NW 88 WAY
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR
Name RUBEL, JANIS
Address 405 N OCEAN BLVD # 1809
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name GOLDBERG, MARK
Address 6502 NW 16TH ST
City-State-Zip: PLANTATION FL 33313

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: NEIL LEIBOWITZ**TREASURER/ DIRECTOR** 04/22/2013_____
Electronic Signature of Signing Officer/Director Detail_____
Date