Entity Name: BROWARD COUNTY COMMISSION GOVERNMENTAL LEASING CORPORATION Current Principal Place of Business:

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

115 S ANDREWS AVE. GOVERNMENT CENTER, S-423 FT. LAUDERDALE, FL 33301

DOCUMENT# N44217

Current Mailing Address:

115 S ANDREWS AVE. GOV'T CTR, STE #513 FT. LAUDERDALE, FL 33301

FEI Number: 65-0276964

Name and Address of Current Registered Agent:

SHARIEF, BARBARA FINANCE & ADMIN SVS DEPT, ROOM414 115 S. ANDREWS AVE FORT LAUDERDALE, FL 33301 US Certificate of Status Desired: No

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:	BARBARA SHARIEF			04/23/2014
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	MS.	Title	MS.	
Name	LIEBERMAN, ILENE	Name	JACOBS, KRISTIN	
Address	4809 WOODLANDS BLVD.	Address	651 NE 5TH STREET	
City-State-Zip:	TAMARAC FL 33319	City-State-Zip:	POMPANO FL 33060	
Title	MS.	Title	MR.	
Name	RITTER, STACY	Name	LAMARCA, CHIP	
Address	7711 SALEM LANE	Address	2605 NE 24 STREET	
City-State-Zip:	PARKLAND FL 33067	City-State-Zip:	LIGHTHOUSE POINT FL 3306	4
Title	MS.	Title	MS.	
Name	WEXLER, LOIS	Name	GUNZBURGER, SUZANNE	
Address	16175 GOLF CLUB RD., APT. 301	Address	803 N. SOUTHLAKE DRIVE	
City-State-Zip:	WESTON FL 33326	City-State-Zip:	HOLLYWOOD FL 33019	
Title	MS.	Title	MR.	
Name	SHARIEF, BARBARA	Name	RYAN, TIM	
Address	16482 SW 18TH STREET	Address	5691 WOODLAND LANE	
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	FORT LAUDERDALE FL 33312	2

Continues on page 2

MS.

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: BARBARA SHARIEF

Electronic Signature of Signing Officer/Director Detail

Date

04/23/2014

Officer/Director Detail Continued :

Title	MR.
Name	HOLNESS, DALE VC
Address	2630 NW 52 AVENUE
City-State-Zip:	LAUDERHILL FL 33313