

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 331276

FILED
May 08, 2009
Secretary of State

Entity Name: BROWARD ACCOUNTING SYSTEMS INC

Current Principal Place of Business:

2317 NE 8TH STREET
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

2317 NE 8TH STREET
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 59-1213701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARCHE JR, JAMES
2632 N.W. 43RD ST.
SUITE A-102
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: JOHNSON, JOHN A
Address: 2317 NE 8TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VS () Delete
Name: JOHNSON, CAROL S.
Address: 2317 NE 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: S () Delete
Name: LARCHE JR, JAMES (ASST.)
Address: 2632 NW 43RD ST., STE. A-102
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: JOHNSON, JOHN
Address: 2317 NE 8TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: JOHNSON, CAROL S.
Address: 2317 NE 8TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A. JOHNSON

PRES

05/08/2009

Electronic Signature of Signing Officer or Director

Date