

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # 705255	
1. Entity Name CHRISTIAN BUSINESS MEN'S COMMITTEE OF FORT LAUDERDALE, INC.	

Principal Place of Business 1 FINANCIAL PLAZA #2602 FT LAUDERDALE FL 33394 US	Mailing Address 1 FINANCIAL PLAZA #2602 FT LAUDERDALE FL 33394 US
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent DAVELL, WILLIAM C. , 1 FINANCIAL PLAZA SUITE 2602 FT LAUDERDALE FL 33394	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
--	---

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	(NOTE, Registered Agent signature required when reinstating)	DATE
-----------	--	------

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
--	---	--------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SCOTT, WESLEY 2225 NE 16TH AVE. WILTON MANORS FL ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition U00000063499 02/23/04-80165-002 61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DAVELL, WILLIAM C. 1 FINANCIAL PLAZA STE 2602 FT LAUDERDALE FL 33394 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ESTLER, STEVEN D. 600 CORPORATE DRIVE, STE. 200 FORT LAUDERDALE FL 33334 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	President / Date 2/19/04
--	--------------------------