

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707037

FILED
Feb 08, 2012
Secretary of State

Entity Name: INDEPENDENT INSURANCE AGENTS OF BROWARD COUNTY, INC.

Current Principal Place of Business:

5035 REGENCY ISLES WAY
COOPER CITY, FL 33330 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551348
DAVIE, FL 333551348 US

New Mailing Address:

FEI Number: 59-0944561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FASSBACH, KAREN P
5035 REGENCY ISLES WAY
COOPER CITY, FL 33330 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: DELAURO, JOE
Address: 1000 S STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317 US

Title: TREA
Name: CLEIN, STEVE
Address: P.O. BOX 824024
City-St-Zip: SOUTH FLORIDA, FL 33082 US

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: KAREN FASSBACH

ED

02/08/2012

Electronic Signature of Signing Officer or Director

Date