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

DOCUMENT # 708775

1. Entity Name

SIGNATURE:

BOYS' CLUBS OF BROWARD COUNTY, INC.

2. Principal Place of Business 2. Finding Address 3. Mailing Address 3. Mailing Address 3. Mailing Address 4. FE Number 59-1108790 Applied For Not Appli	Principal Place of Business		Mailing Address							
Summary Summ	1401 NORTHEAST 26TH STREET FT. LAUDERDALE FL 33305					94061934				
Summary Summ						YC. WIRE				A II 141
City & State City & State City & State City & State Country Zip Zip Zip Zip Zip Zip Zip Zi	2." Principal Pl		3. Mailing Address		. "'[1					
SPONTILLUDERDALE FL 33305 The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of re	Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E037 (11/03)				
SECONATURE SUPPLY SET AND DIRECTORS 11. ADDITIONS/CHANGES TO OFICERS AN	City & State		City & State			4. FEI Number	59-1108790		<u> </u>	
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HUGHES, DAVID 1401 NORTHEAST 26TH ST. FT LAUDERDALE FL 33305 City FL Zip Code 2. 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 Symbol. Spring in present name of algorithms agent and title in applicable. PILE NOW: FEE IS \$61.25 9. Election Compaging Financing Trust Fund Contribution. 9. Section Compaging Financing Story of 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 Signature. Signa	6. Name and Address of Current Registered Agent					7. Name and Add	dress of New Regi	stered Ag	ent	
14.01 NORTHEAST 26TH ST. FT LAUDERDALE FL 33305 City FL Zip Code 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 SIGNATURE Syname, higher or sevend have of registered agent and line if applicable (NOTE Registered Agent agrants expend when encission) DATE SIGNATURE SUBJECT NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Make SIRET ADDRESS CITY 57.20 FORT LAUDERDALE FL 39305 3730 ITEL MAKE SIRET ADDRESS CITY 57.20 CITY										
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B. The above named entry 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 Synthem, typed or premed name of registered agent and like if applicable. (NOTE Registered Agent agentine required when recessing) DATE FILE NOW: FEE IS \$61.25 Due By May 1, 2004 Trust Fund Contribution. Addition of Florida Department of State Title NAME SIGNATURE OFFICERS AND DIRECTORS TITLE NAME PERRY, FREDERICS CITY 51.20 TITLE NAME SIGNET ADDRESS CITY 51.20 CITY 51.20 CHARRIS, SOLOMAN SIGNET ADDRESS CITY 51.20 CITY 51.20 CHARRIS, SOLOMAN SIGNET ADDRESS CITY 51.20 CHARRIS, SOLOMAN SIGNET ADDR	FT LAUDERDALE FL 33305				*					
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12. Thereby 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.

INTED MAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 23, 2004 8:00 am Secretary of State 04-23-2004 90240 017 ****61.25