

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 708959

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** BROWARD COUNTY AIRBOAT HALFTRACK AND CONSERVATION CLUB, INC.

**Current Principal Place of Business:**

1910 NW 118 AVE  
PEMBROKE PINES, FL 33026 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 291022  
DAVIE, FL 33329 US

**New Mailing Address:**

**FEI Number:** 59-1927780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARD, BRUCE B T  
1910 NW 118 AVENUE  
PEMBROKE PINES, FL 33026 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: P  
Name: STORMS, JOHN  
Address: 1600 SW 65 AVE.  
City-St-Zip: BOCA RATON, FL 33428

Title: VP  
Name: CARROLL, DAMON  
Address: 2701 SW 154 LANE  
City-St-Zip: DAVIE, FL 33331

Title: T  
Name: WARD, BRUCE B  
Address: 1910 NW 118 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: S  
Name: ORTH, MELODY  
Address: 1600 SW 65 AVE.  
City-St-Zip: BOCA RATON, FL 33428

Title: D  
Name: HORA, PETER  
Address: 1861 SW 37TH WAY  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D  
Name: NEWTON, JAMES  
Address: 2041 SW 50 AVE  
City-St-Zip: PLANTATION, FL 33317

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: BRUCE B. WARD

T

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date