

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90094 029 ****61.25

DOCUMENT # 714629

1. Entity Name
EASTER SEALS BROWARD COUNTY, INC.



Principal Place of Business
**6951 W SUNRISE BLVD.
PLANTATION, FL 33313**

Mailing Address
**6951 W SUNRISE BLVD.
PLANTATION, FL 33313**

14005522



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01122004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-0668471

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FORMAN, THEODORE
255 N.E. THIRD COURT
BOCA RATON, FL 33432**

Name

Street Address (P.O. Box Number is Not Acceptable)

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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 **C** ☐ Delete
NAME **STEPHENS, JAMES**
STREET ADDRESS **200 FIESTA WAY**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33301**

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6951 W. SUNRISE BLVD.**
CITY-ST-ZIP **PLANTATION FL 33313**

TITLE **P** ☐ Delete
NAME **DAUSMAN, REBECCA**
STREET ADDRESS **6951 W SUNRISE BLVD**
CITY-ST-ZIP **PLANTATION, FL 33313**

TITLE **S** ☐ Change ☒ Addition
NAME **SUSAN M. SMITH**
STREET ADDRESS **6951 W. SUNRISE BLVD.**
CITY-ST-ZIP **PLANTATION, FL 33313**

TITLE **T** ☐ Delete
NAME **FORMAN, THEODORE**
STREET ADDRESS **255 N.E. THIRD COURT**
CITY-ST-ZIP **BOCA RATON, FL 33432**

TITLE **C** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6951 W. SUNRISE BLVD.**
CITY-ST-ZIP **PLANTATION, FL 33313**

TITLE **SD** ☐ Delete
NAME **NEWMAN, WREN**
STREET ADDRESS **1749 NW 91ST AVE**
CITY-ST-ZIP **PLANTATION, FL**

TITLE **VC** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6951 W. SUNRISE BLVD**
CITY-ST-ZIP **PLANTATION FL 33313**

TITLE **D** ☒ Delete
NAME **CORY, DAVID**
STREET ADDRESS **6600 TAFT ST.**
CITY-ST-ZIP **HOLLYWOOD, FL**

TITLE **T** ☐ Change ☒ Addition
NAME **NEAL FALK**
STREET ADDRESS **6951 W. SUNRISE BLVD.**
CITY-ST-ZIP **PLANTATION, FL 33313**

TITLE **D** ☐ Delete
NAME **ROBERSON, CLAIRE**
STREET ADDRESS **2810 N COMMERCE PARKWAY**
CITY-ST-ZIP **MIRAMAR, FL 33025**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6951 W. SUNRISE BLVD.**
CITY-ST-ZIP **PLANTATION FL 33313**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/04 954/792-8772

Attachment

14005522

2004 Not-For Profit Corporation
Annual Report

Document #714629
Addendum

Additional Board Members:

D

Chuck Bonfiglio
6951 W. Sunrise Blvd.
Plantation, FL 33313

D

Barron W. Johnson, MD
6951 W. Sunrise Blvd.
Plantation, FL 33313

D

Bernard Schwalbe, LUTCF
6951 W. Sunrise Blvd.
Plantation, FL 33313