


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90154 003 ****70.00

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																																																																																												
2. Principal Place of Business		3. Mailing Address																																																																																													
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																													
City & State		City & State																																																																																													
Zip	Country	Zip	Country	4. FEI Number 59-0668471																																																																																											
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																																																																																											
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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																												
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																															
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">RUBINOFF, RON</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD. PLANTATION, FL 33313</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">ARMIGER, SUSAN</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD PLANTATION, FL 33313</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">FORMAN, THEODORE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD. PLANTATION, FL 33313</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">VC NEWMAN, WREN</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD. PLANTATION, FL 33313</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">D BONFIGILIO, CHUCK</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD. PLANTATION, FL 33313</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">S SMITH, SUSAN</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W SUNRISE BLVD. PLANTATION, FL 33313</td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">Teri Balter</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">6951 W. Sunrise Blvd Plantation FL 33313</td> </tr> </table> </div> </div>						TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	RUBINOFF, RON		CITY-ST-ZIP	6951 W SUNRISE BLVD. PLANTATION, FL 33313		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	ARMIGER, SUSAN		CITY-ST-ZIP	6951 W SUNRISE BLVD PLANTATION, FL 33313		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	FORMAN, THEODORE		CITY-ST-ZIP	6951 W SUNRISE BLVD. PLANTATION, FL 33313		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	VC NEWMAN, WREN		CITY-ST-ZIP	6951 W SUNRISE BLVD. PLANTATION, FL 33313		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	D BONFIGILIO, CHUCK		CITY-ST-ZIP	6951 W SUNRISE BLVD. PLANTATION, FL 33313		TITLE	NAME	<input checked="" type="checkbox"/> Delete	STREET ADDRESS	S SMITH, SUSAN		CITY-ST-ZIP	6951 W SUNRISE BLVD. PLANTATION, FL 33313		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS	Teri Balter		CITY-ST-ZIP	6951 W. Sunrise Blvd Plantation FL 33313	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				4/27/06 954-792-8772 <small>Date Daytime Phone #</small>																																																																																											

ATTACHMENT 40085198
714629

**EASTER SEALS BROWARD COUNTY, INC.
BOARD OF DIRECTORS
FY 2005-2006**

Theodore S. Forman, Chairman

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Dr. Wren Newman, Vice Chairman

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Ron Rubinoff, Treasurer

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