

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715302

FILED
Mar 19, 2009
Secretary of State

Entity Name: JUNIOR GOLF ASSOCIATION OF BROWARD COUNTY, INC.

Current Principal Place of Business:

101 NE 3RD AVENUE
SUITE 1500
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

101 NE 3RD AVENUE
SUITE 1500
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 23-7145005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATIMER, ALFRED C
1400 E. OAKLAND PK BLVD
#102
FORT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

BOONE, JAMES B
101 NE 3RD AVE.
SUITE 1500
FORT LAUDERDALE, FL 33301 US

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: JAMES B. BOONE

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AMORILLO, PAULA
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SD () Delete
Name: HAUBENSTOCK, STEVEN
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VPD () Delete
Name: STEINBERG, ALAN
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD () Delete
Name: BOONE, JAMES
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMORIELLO, PAULA
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: BOONE, JAMES B
Address: 101 NE 3RD AVENUE #1500
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES B. BOONE

T/D

03/19/2009

Electronic Signature of Signing Officer or Director

Date