

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90169 026 ****61.25

DOCUMENT # 716938



1. Entity Name
BROWARD ESTATES CIVIC ASSOCIATION, INC.

Principal Place of Business
**3820 NORTHWEST 5TH COURT
FT. LAUDERDALE FL 33311**

Mailing Address
**3820 NORTHWEST 5TH COURT
FT. LAUDERDALE FL 33311**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **51-0178467**

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

**ALLEN, W. GEORGE, ESQ.
116 SOUTHEAST 6TH COURT
FT. LAUDERDALE FL 33301**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

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	P	<input type="checkbox"/> Delete
NAME	GREENE, JACOB	
STREET ADDRESS	621 NW 39TH AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE	V	<input type="checkbox"/> Delete
NAME	COX, TIMOTHY	
STREET ADDRESS	551 NW 39TH AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE	S	<input type="checkbox"/> Delete
NAME	GREENE, YVONNE	
STREET ADDRESS	621 NW 39TH AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARNO, KATHLYN	
STREET ADDRESS	3789 N.W. 5TH STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	WIMBERLY, JOHN	
STREET ADDRESS	3221 NW 5TH ST	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	STOKES, JOYCE	
STREET ADDRESS	3821 N.W. 6TH STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Jacob Greene* **REQUITADON GREENE 1-13-03 (254) 926-0900**

CR2E037 (10/02)