2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# 720214

Entity Name: BROWARD CHILDRENS CENTER, INC.

Current Principal Place of Business:

1801 E ATLANTIC BLVD
POMPANO BCH, FL 33060

New Principal Place of Business:

200 SE 19TH AVE
POMPANO BCH, FL 33060

Current Mailing Address:

200 S.E. 19TH AVE.
POMPANO BCH, FL 33060

New Mailing Address:

200 SE 19TH AVE
POMPANO BCH, FL 33060

FEI Number: 59-1378244 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, JOYCE T CPA
289 E. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33334 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	( ) Delete
Name:	STEWART, JOYCE T	
Address:	289 E. OAKLAND PARK BLVD.	
City-St-Zip:	FORT LAUDERDALE, FL 33334	
Title:	D	( ) Delete
Name:	MC GOUGH, WILLIAM	
Address:	13 ROYAL PALM WAY, # 603	
City-St-Zip:	BOCA RATON, FL 33432	
Title:	D	( ) Delete
Name:	COLSON, DEAN	
Address:	2206 CYPRESS BEND DR# 402	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	T	( ) Delete
Name:	VAN VORST, JOHN	
Address:	6550 N. FEDERAL HWY	
City-St-Zip:	FORT LAUDERDALE, FL 33308	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOYCE T. STEWART MS. 02/11/2009

Electronic Signature of Signing Officer or Director — Date