

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721712

FILED
Apr 15, 2009
Secretary of State

Entity Name: SOUTHWEST BROWARD COUNTY CHAPTER #73 OF AARP, INC.

Current Principal Place of Business:

PINES RECREATION CENTER
7400 PINES BLVD
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

7841 NW 30TH ST
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 23-7129049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FUNG, JASON H
7841 NW 30TH ST
HOLLYWOOD, FL 33024 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: SWEENEY, ROLAND
Address: 251 SW 134TH WAY APT 214
City-St-Zip: PEMBROKE PINES, FL 33027

Title: DV () Delete
Name: WATSON, RITA
Address: 1100 NW 173RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T () Delete
Name: FUNG, JASON H
Address: 7841 NW 30 ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: S () Delete
Name: ECTON, JEWEL
Address: 1345 SW 122ND WAY
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: FUNG-ON, JASON H
Address: 7841 NW 30 ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: S (X) Change () Addition
Name: BROOKS, BARBARA J
Address: 6500 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33024

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: BARBARA BROOKS

S

04/15/2009

Electronic Signature of Signing Officer or Director

Date