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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Suzanne B. Montoye
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727685 (0)
1. Corporation Name
BIG BROTHERS/BIG SISTERS OF BROWARD, INC.

Principal Place of Business Mailing Address
3601 W. COMMERCIAL BLVD SUITE 10 FT. LAUDERDALE FL 33309
3601 W. COMMERCIAL BLVD. SUITE 10 FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/08/1973
3a. Date of Last Report 05/01/1994

4. FEI Number 59-1507595
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 25 Country 29 Zip Country 30 Country

9. Name and Address of Current Registered Agent
FUSCO, JOHANNA
3601 W. COMMERCIAL BLVD.
SUITE 10
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name Ana M. Cedeño
82 Street Address (P.O. Box Number is Not Acceptable) Big Brothers, Big Sisters of Broward
83 3601 W. Commercial Blvd #10
84 City Ft. Lauderdale FL 85 Zip Code 33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* 4-25-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	WILLIAMS, JEFF
STREET ADDRESS	2424 N. FEDERAL HWY #100
CITY, ST, ZIP	BOCA RATON FL
TITLE	SD
NAME	ANTHONY DE MEO
STREET ADDRESS	2400 E. COMMERCIAL BOULEVARD, #517
CITY, ST, ZIP	FT. LAUDERDALE FL
TITLE	TD
NAME	CICORA, KEN
STREET ADDRESS	350 SE 2ND ST., #400A
CITY, ST, ZIP	FT. LAUDERDALE FL
TITLE	TD
NAME	FILSON, TERESA (PLANTA)
STREET ADDRESS	10012 N. W. 5 STREET
CITY, ST, ZIP	PLANTATION FL
TITLE	VD
NAME	ANDERSEN, RICHARD
STREET ADDRESS	2267 NW 199 STREET
CITY, ST, ZIP	MIAMI FL
TITLE	VD
NAME	BINGER, ROY
STREET ADDRESS	300 S PINE ISLAND ROAD
CITY, ST, ZIP	PLANTATION FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	1st Vice President	Change <input checked="" type="checkbox"/> Addition
12 NAME	Jim Eisenstein	
13 STREET ADDRESS	2929 E. Commercial Blvd #PH-C	
14 CITY, ST, ZIP	Ft. Lauderdale, FL 33308	
21 TITLE	2nd Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Dan Letina	
23 STREET ADDRESS	12801 W. Sunrise Blvd.	
24 CITY, ST, ZIP	Sunrise, FL 33323	
31 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Dr. Wilhelmena Mack	
33 STREET ADDRESS	3501 Johnson St.	
34 CITY, ST, ZIP	Hollywood, FL 33021	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE	Immediate Past President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	Ken Cicora	
53 STREET ADDRESS	350 SE 2nd St.	
54 CITY, ST, ZIP	Ft. Lauderdale, FL 33301	
61 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	Binger, Roy	
63 STREET ADDRESS	491 N.W. 40 Ave.	
64 CITY, ST, ZIP	Plantation, FL 33317	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Roy Binger, President
4/27/95 (305) 485-5481