2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2004 8:00 am Secretary of State

DOCUMENT # 729971 1. Entity Name ESTATE PLANNING COUNCIL OF BROWARD COUNTY, INC.						etary 0 004 90020 01		
Principal Place of Business RSM MCGLADREY, INC 100 NE 3RD AVE, SUITE 300 FT. LAUDERDALE, FL 33301 US 2. Principal Place of Business		Mailing Address RSM MCGLADREY, INC 100 NE 3RD AVENUE, S FT. LAUDERDALE, FL 3 3. Mailing Address						
]	ovia Bank, N.A.	enk, N	1. <u>A</u> ,	01072004 Cha-NP				
350 E. Las Olas Blug. # 1800 350 E. Las Ola City & State City & State			sR vel #1	800	Oligiti	CR2E037	· , ,	olied For
	iderclale, FL	F+ Landerd	ele, FL		4. FEI Number 23-7411611	· 	- 1 · · ·	Applicable
333 <i>o</i>	Country USA	33301	Country		5. Certificate of Status Desire		8.75 Addi se Required	
	6. Name and Address of Current I				7. Name and Address of Ne	w Registered Ag	ent	
PICOLO, SHARON E Name Michael B Croston								
100 NE 3RD AVENUE, SUITE 300 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE, FL 33301								
350 E. Las Olas Blud #1800								
City Ft Landerdole FL 33301								
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 Purchase Description of Professional Signature, typed or printed name of registered agent signature (NOTE: Registered Agent signature required when reinstating) DATE DATE								
Michael B. Croston, Treasurer								
	Filing Fee is \$61.25 Due by May 1, 2004	Trust Fund C			Added to Fees	Florida Departn	nent of St	ete 🦠
10.	OFFICERS AND DIR	ECTORS Delete	TITLE	50	ADDITIONS/CHANGES TO OFF	•		<u> </u>
NAME	ESTLER, STEPHEN E	C Deserte	NAME	Estl	ler, Stephen B O Corporate D		er i	
STREET ADDRESS CITY-ST-ZIP	600 CORPORATE DRIVE STE 20 FT. LAUDERDALE, FL 33334	00	STREET ADDRESS CITY-ST-ZIP	100	Lauderdale,	LINE) /	11001 34	
TITLE	DVP	☐ Delete	TITLE	77	rayor racie,		Change	Addition
NAME STREET ADDRESS	PICOLO, SHARON E 100 NE 3RD AVENUE, SUITE 30	0	NAME STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301	·	CITY-ST-ZIP					l
TITLE	DT	☐ Delete	TITLE	,		[Change	Addition
NAME STREET ADDRESS	CROSTON, MICHAEL B 350 E, LAS OLAS BLVD SUITE 1	800	NAME Street address					
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301		CITY~ST-ZIP	ļ			-	
TITLE NAME		☐ Delete	title Name			(Change	Addition
STREET ADDRESS			STREET ADDRESS					:
CITY-ST-ZIP			CITY-ST-ZIP	-		-—— <u>—</u>	☐ Change	☐ Addition
NAME		☐ Delete	TITLE NAME			ι	unange	☐ Audition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE	-			☐ Change	Addition
NAME	·	term	NAME		•			
STREET ADDRESS			STRÉET 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								
SIGNAT	URE: The	Gal De	corlos	\sim	Jan 7. 2	004	39	17_