

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Apr 02, 2007 8:00 am**  
**Secretary of State**

03-21-2007 90040 032 \*\*\*\*70.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                              |                                                                                                                        |  |                                                                                                                                                                                                     |                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # 732795</b><br>1. Entity Name<br><b>BROWARD WORKMEN'S CIRCLE CEMETERY DEPARTMENT, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                              |                                                                                                                        |  |                                                                                                                    |                                                                                                                                            |
| Principal Place of Business<br><b>C/O SYD BYKOFISKY<br/>112 BRITTANY C<br/>DELRAY BEACH FL 33446<br/>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                              |                                                                                                                        |  | Mailing Address<br><b>112 BRITTANY C<br/>DELRAY BEACH FL 33446<br/>US</b>                                                                                                                           |                                                                                                                                            |
| 2. Principal Place of Business - No P.O. Box #<br><b>112 BRITTANY C</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                              | 3. Mailing Address<br><b>112 BRITTANY C</b>                                                                            |  |                                                                                                                                                                                                     |                                                                                                                                            |
| Suite, Apt. #, etc.<br><b>112 BRITTANY C</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                              | Suite, Apt. #, etc.<br><b>112 BRITTANY C</b>                                                                           |  |                                                                                                                                                                                                     |                                                                                                                                            |
| City & State<br><b>DELRAY BEACH, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                              | City & State<br><b>DELRAY BEACH, FL</b>                                                                                |  |                                                                                                                                                                                                     |                                                                                                                                            |
| Zip<br><b>33446</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              | Country<br><b>PALM BEACH</b>                                                                                           |  | 4. FEI Number<br><b>59-1635507</b>                                                                                                                                                                  |                                                                                                                                            |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                              | Applied For<br><input type="checkbox"/> Not Applicable                                                                 |  |                                                                                                                                                                                                     |                                                                                                                                            |
| 6. Name and Address of Current Registered Agent<br><b>SYD BYKOFISKY<br/>112 BRITTANY C<br/>DELRAY BEACH FL 33446</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                              |                                                                                                                        |  | 7. Name and Address of New Registered Agent<br>Name <b>SYD BYKOFISKY</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>112 BRITTANY C</b><br>City <b>DELRAY BEACH</b> FL <b>33446</b> |                                                                                                                                            |
| 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.<br>SIGNATURE <u><i>Syd Bykofsky</i></u> DATE <u>3/13/07</u><br><small>Signature, type or printed name of registered agent and fee, if applicable. (NOTE: Registered Agents signature required when reinstating)</small>                                                                                                                                                                                        |                                                                                                                              |                                                                                                                        |  |                                                                                                                                                                                                     |                                                                                                                                            |
| <b>FILE NOW: FEE IS \$61.25<br/>Due By May 1, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                              | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |  | <b>Make Check Payable to<br/>Florida Department of State</b>                                                                                                                                        |                                                                                                                                            |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                              |                                                                                                                        |  | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                        |                                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>BYKOFISKY, SYD <i>President</i> <input type="checkbox"/> Delete<br>112 BRITTANY C<br>DELRAY BEACH FL 33446             |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <i>Miriam Guz</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>94 Seville F<br>Delray Beach, FL 33446              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DV<br>WEINSTEIN, SYLVIA <i>Trustee</i> <input checked="" type="checkbox"/> Delete<br>157 BRITTANY D<br>DELRAY BEACH FL 33446 |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <i>Murray Guz</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>94 Seville F Board Member<br>Delray Beach, FL 33446 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>RUNIN, FLORENCE <input type="checkbox"/> Delete<br>7210 NW 70 TH AVE.<br>TAMARAC FL 33063                               |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>STRAUSS, ERIC <i>Trustee</i> <input type="checkbox"/> Delete<br>153 SEVILL E<br>DELRAY BEACH FL 33446                   |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>COHEN, MARTIN <i>Vice President</i> <input type="checkbox"/> Delete<br>152 SEVILL G<br>DELRAY BEACH FL 33446            |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                              |                                                                                                                        |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY ST ZIP                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u><i>Syd Bykofsky</i></u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                              |                                                                                                                        |  | Date <u>3</u> Daytime Phone #                                                                                                                                                                       |                                                                                                                                            |