2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

DOCUMENT# 733491

Entity Name: BROWARD COUNTY AREA LOCAL 1201, AMERICAN POSTAL WORKERS UNION, INC.

Current Principal Place of Business:

6500 W SUNRISE BLVD.
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

6500 W SUNRISE BLVD.
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 59-1545788 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, CARL
6500 W SUNRISE BLVD.
PLANTATION, FL 33313 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: PD
Name: PIERCE, CAROLYN
Address: 1401 NW 10 ST APT. S
City-St-Zip: DANIA, FL 33004

Title: VD
Name: RIDDELL, JEFF
Address: 5712 NW 46 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: STD
Name: JOHNSON, CARL
Address: 11601 NW 29 ST
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: NORTH, DIANE
Address: 1421 SW 110 WAY
City-St-Zip: DAVIE, FL 33324

Title: D
Name: PICK, WILLIAM
Address: 6018 SW 35TH ST #205
City-St-Zip: MIRAMAR, FL 33023

Title: D
Name: LOPEZ, DALE
Address: 7610 STIRLING ROAD UNIT E207
City-St-Zip: DAVIE, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: CARL JOHNSON STD 04/17/2012

Electronic Signature of Signing Officer or Director — Date