FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

733781

(9)

GENERAL APPRENTICESHIP ADVISORY COMMITTEE OF BRO WARD COUNTY, INC.

| Trining Townstrip Him. | | | | | | | | { | ALE BUBUL BUBUL P | | | |
|--|-----------------------|---------------------------|----------|-------------------------------------|-----------------|--------|-----------------|--|--|---------------|------------------|--|
| Principal Place of Business Mailing Address | | | | | | | | | | / | U U U | |
| 2840 N.W. 27 AVENUE FORT LAUDERDALE FL 33311 US | | | | 40 NW 27 AVENU | IF | | | ł | 3. Date Incorporated or Qualified | | | |
| | | | | N/A FT LAUDERDALE FL 33111 US | | | | - | l | | | |
| | | | | | | | | - 1 | 09/08/1975 | | | |
| | | | | | | | | ļ | 4. FEI Number | | pplied For | |
| | | | | | | | | | 23-7413124 | L_N | lot Applicable | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | | 5. Certificate of Status Desired | \$8.75 | Additional | |
| 21 | | | | 28 | | | | | | Fee F | Required | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | 6. Election Campaign Financing | \$5.00 | | |
| 22 | | | | 27 | | | | | Trust Fund Contribution Added to Fees | | | |
| City & State | | | | City & State | | | | } | 7. Is this nonprofit corporation a homeowners association? | | | |
| 23 | | | | 28 | | | | | ☐ Yes ☑ No | | | |
| Zip | Country | | | Zip Country | | | 1 | | 8. This corporation owes or has paid the cu | γènt year In | ntangible | |
| 24 | 25 | | | 29 30 | | | | 1 | Personal Property Tax due June 30. | | □ No | |
| | 9. Name | and Address of Curre | nt Regis | egistered Agent | | | | 10, Name and Address of New Registered Agent | | | | |
| | | | | | | 81 | Nam | 8 | | | | |
| MAIERHOFER, KENNETH C | | | | | | 82 | Ctros | reet Address (P.O. Box Number is Not Acceptable) | | | | |
| 2640 NW 27TH AVENUE | | | | | | | Sirec | N MUCHOS | ss (F.O. box radiliber is fact Acceptable) | | | |
| FT. LAUDERDALE FL 33311 | | | | | | | - | | | | | |
| 11,210 | | 2 00011 | | | | L | | | | | | |
| • | | | | | | 84 | | | FL | . 1 1 | Code | |
| 11. Pursuant I | to the provis | ions of Sections 617.050 | 02 and 6 | 17.1508, Florida | Statutes, the | abov | e-name | d corpor | ration submits this statement for the purpose on's board of directors. I hereby accept the app | f changing | its registered | |
| agent. I a | m ta miliar wi | ith, and accept the oblig | ations o | f, Section 617.0! | 503, Florida Si | atute | y iiro C. S. | Jiporatioi | in a board or directors. Thereby accept the app | Kullingili as | ន ខេត្តបន្តទេខេត | |
| SIGNATURE | | | | | | | | | | | | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg | | | | | | | ent eignati | beriuper eru | when reinstaling) DATE | | | |
| 12, | | OFFICERS AN | D DIREC | | 13 | | | | ADDITIONS/CHANGES TO OFFICERS AND |) DIRECTO | | |
| TITLE | TD | | | ☐ DEFE | 1.1 | TITLE | | | | Change | Addition | |
| NAME | MAJERH | ofer, Kenneth C | | | 1.2 | NAME | | 1 | | | | |
| STREET ADDRESS | | N 27TH AVE | | | 1,3 | STREET | ADDRESS | s | | | | |
| CITY-ST-ZIP | | DERDALE, FL 00000 | | | - 1 | CITY-S | | 1 | | | | |
| TITLE | VCD | <u> </u> | | DELE | | TITLE | 77 &11 | - | | Change | Addition | |
| NAME | , | PAUL H | | | | NAME | | 1 | | | | |
| | | V 277H AVE | | | 1 | | 1010014 | | | | , | |
| STREET ADDRESS | | DERDALE, FL 00000 | | | | | ADDRESS | ' | | | | |
| CTTY-ST-ZIP | | JENDALE, FL 00000 | | DELE | 7E 2.4 | CITY- | S1-ZIP | ╌ | | Change | Addition | |
| TITLE | CD | IOLAI | | | | TITLE | | | | LI ORNIGE | L Addrich | |
| NAME | HARRIS, | | | | | NAME | | | | | | |
| STREET ADDRESS | | ANDREWS AVE | | | 3.3 | STREET | ADDRESS | S | | | | |
| CITY-ST-ZIP | | DERDALE FL | | | | CITY- | ST-ZIP | | | | F-1-1 | |
| TITLE | SD | | | ☐ DELE | 3t 41 | TITLE | | 1 | | L Change | Addition | |
| NAME | | n, arthur L | | | 4.2 | NAME | | | | | | |
| STREET ADORESS | 13201 N | IW 45TH AVE | | | 4.3 | STREET | ADDRESS | 3 | | | | |
| CITY-ST-ZIP | MIAMI F | L | | | 4.4 | CITY-5 | T-ZIP | _ | | | | |
| TITLE | | | | DELE | TE 5.1 | TITLE | | | | Change | Addition | |
| NAME | | | | | 5.2 | NAME | | | | | au | |
| STREET ADDRESS | | | | | 5.3 | STREET | ADDRESS | ; | | | 1-30 | |
| CITY-ST-ZIP | | | | | | CITY-S | | 1 | | | , 🏎 | |
| TITLE | | | | DELE | | TITLE | *** | + | anno anno anno anno anno anno anti- | Change | Addition | |
| NAME | | | | | | NAME | | 1 | 6000024168 -01/30/98010140 | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | Anneree | . } | -U1/3U/38U1U14U | JO | | |
| STREET ADDRESS | | | | | 6.3 | PIKEEL | ADDRESS | ` | ***61.25 | | | |

5.4 CITY-ST-ZIP

14. Thereby 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 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:

1-22-98

FILED

Jan 30 1998 8:00am

Secretary of State

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954-739-9206