2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#736989

FILED Feb 11, 2008 Secretary of State

Entity Name: NORTHWEST BROWARD COLUMBIAN CLUB, INC.

	. CE AL/ENUE	of Business:	New Principal Place		
	'. 65 AVENUE E, FL 33063 (JS			
Current N	/lailing Address	:	New Mailing Addres	ss:	
	'. 65 AVENUE E, FL 33063				
El Number	r: 59-1758426	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
lame and	d Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
2611 RIVE	N, ROBERT W S ERSIDE DRIVE, 7 PRINGS, FL 330	#4			
	e named entity su e of Florida.	ubmits this statement for the	e purpose of changing its registere	ed office or registered agent, or bot	
SIGNATU	RE:				
		Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
itle: lame: ddress:	P () E BUBELLO, RUSS 7630 MARGATE	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
	MARGATE, FL 3				
itle: lame: ddress:		Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
itty-St-Zip: ittle: ame: ddress: ity-St-Zip: ittle: ame: ddress:	VP () COLON, RALPH 6751 NW 22 STR MARGATE, FL 3	Delete REET 3063 Delete TH G S BLVD	Name: Address:	() Change () Addition () Change () Addition	
itle: lame: ddress:	VP () COLON, RALPH 6751 NW 22 STR MARGATE, FL 3 S () C BISHOP, KENNE 1736 HAMMOCK COCONUT CREE	Delete REET 3063 Delete TH G S BLVD SK, FL 33063 Delete J RRACE	Name: Address: City-St-Zip: Title: Name: Address:		
itle: ame: ddress: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip:	VP () E COLON, RALPH 6751 NW 22 STR MARGATE, FL 3 S () E BISHOP, KENNE 1736 HAMMOCK COCONUT CREE T () E FORD, WILLIAM 1675 N.W. 66 TE MARGATE, FL 3	Delete REET 3063 Delete TH G S BLVD EK, FL 33063 Delete J RRACE 3063 Delete REDERICK	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RUSSELL J. BUBELLO P 02/11/2008