

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738758

FILED
Apr 30, 2009
Secretary of State

Entity Name: BROWARD COUNTY CRIME COMMISSION, INC.

Current Principal Place of Business:

10640 NW 32ND STREET
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

10640 NW 32ND STREET
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES DEPELISI
10640 NW 32ND STREET
SUNRISE, FL 33351 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: T () Delete
Name: PINTER, FRANKLIN J
Address: 2124 N 14 COURT
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: KARACHALIOS, THEODORE
Address: 4051 SW 131 ST.
City-St-Zip: FORT LAUDERDALE, FL 33330

Title: VP () Delete
Name: WIERZBICKI, RICK
Address: 590 KENSINGTON PLACE
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: PRES () Delete
Name: DE PELISI, JAMES
Address: 10640 NW 32ND STREET
City-St-Zip: SUNRISE, FL 33351

Title: VC () Delete
Name: HOFHEINZ, MONICA
Address: 4731 FILMORE STREET
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES DEPELISI

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date