

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747370

FILED
Jan 06, 2009
Secretary of State

Entity Name: BROWARD COUNTY VETERANS COUNCIL, INC.

Current Principal Place of Business:

8840 NW 13 STREET
PH
PLANTATION, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

8840 NW 13 STREET
PH
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 65-0199340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLING, WILLIAM
8840 NW 13 STREET
PH
PLANTATION, FL 33322 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 () Delete
Name: KLING, WILLIAM
Address: 8840 NW 13 ST.
City-St-Zip: PLANTATION, FL 33322

Title: VD () Delete
Name: ANTON, JOSEPHINE
Address: 45 PRESTON B
City-St-Zip: BOCA RATON, FL 33636

Title: T () Delete
Name: CARSON, MICHAEL
Address: 1740 SW 55 AVE
City-St-Zip: PLANTATION, FL 33317

Title: S () Delete
Name: YOUNG, LORETTA
Address: 101-01 SUNRISE LAKES BLVD APT 407
City-St-Zip: FORT LAUDERDALE, FL 33322

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:

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: WILLIAM KLING

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date