

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747370

**FILED**  
**Jan 04, 2012**  
**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  
**Name:** KLING, WILLIAM  
**Address:** 8840 NW 13 ST.  
**City-St-Zip:** PLANTATION, FL 33322

**Title:** VD  
**Name:** PHYLLIS, TUREK  
**Address:** 264 NW 95 AVE.  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** T  
**Name:** BLUM, DOROTHY  
**Address:** 102 17 NW 24 PL.  
**City-St-Zip:** SUNRISE, FL 33322

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

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:** WILLIAM KLING

PD

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date