# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 14, 2009**
**Secretary of State**

DOCUMENT# 752055

**Entity Name:** SOUTH BROWARD BUSINESS COUNCIL, INC.

**Current Principal Place of Business:**

4018 BUCHANAN ST
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6091
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number: 59-2040572** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STOODLEY, JAMES J
4018 BUCHANAN ST
HOLLYWOOD, FL 33021 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: STOODLEY, JAMES
Address: 4018 BUCHANAN ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: DV ( ) Delete
Name: SALTZ, MARK L
Address: 3501 GRIFFIN ROAD
City-St-Zip: FT LAUDERDALE, FL 33312

Title: TD ( ) Delete
Name: LEONARD, MALCOLM A
Address: 3810 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: GRANT, JAMES
Address: 6109 PEMBROKE ROAD
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Delete
Name: LUNDY, TONY
Address: 3350 BURRIS ROAD
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: D ( ) Delete
Name: ROBERTS, BRUCE A
Address: 19495 BISCAYNE BLVD
City-St-Zip: AVENTURA, FL 33180

**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:

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 J. STOODLEY PD 01/14/2009
Electronic Signature of Signing Officer or Director — Date