## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 03, 2008 **DOCUMENT#756335** Secretary of State

Entity Name: SOUTH BROWARD BOARD OF REALTORS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

701 PROMENADE DR PEMBROKE PINES, FL 33026

**Current Mailing Address: New Mailing Address:** 

701 PROMENADE DR PEMBROKE PINES, FL 33026

FEI Number: 59-0524665 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LASSITER, WALTER 701 PROMENADE DR PEMBROKE PINES, FL 33026 US

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.

Title:

SIGNATURE:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

(X) Change ( ) Addition () Delete SMITH, JOANN WIETOR, MICHAEL G Name: Name: 5870 S. FLAMINGO RD. Address: 10400 GRIFFIN ROAD #303B Address:

City-St-Zip: COOPER CITY, FL 33330 City-St-Zip: **DAVIE. FL 33328** 

Title: WD () Delete Title: (X) Change ( ) Addition

TERSIGNI, JOAN Name: CHINELLY, JAMES A Name: Address: 600 PINE ISLAND RD., 150 Address: 5400 S UNIVERSITY DR SUITE 604

City-St-Zip:

PLANTATION, FL 33324 City-St-Zip: **DAVIE, FL 33328** 

Title: () Delete Title: (X) Change ( ) Addition

WIETOR, MICHAEL G SARLEY, DONALD J Name: Name: 4801 S UNIVERSITY DR Address: Address: 5675 SW 111 TERR. City-St-Zip: **DAVIE. FL 33328** City-St-Zip: COOPER CITY, FL 33328

Title: ( ) Delete Title: () Change () Addition M

VALDEZ, WILLIAM Name: Name: 510 NW 89 AVE Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip:

() Delete

Title: ( ) Delete Title: (X) Change ( ) Addition

MARKOWITZ, FRAN GRANT, ARCHIBALD Name: Name: 3100 STIRLING RD. 1464 S PALM AVE Address: Address:

City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: PEMBROKE PINES, FL 33025

AGUDO MARTI AGUDO, MARTI Name: Name:

Address: COUNTRY SQUIRE, INC. 4801 S UNIVERSITY DR Address: 10400 GRIFFIN ROAD #303B

**DAVIE, FL 33328 DAVIE, FL 33328** City-St-Zip: 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.

Title:

SIGNATURE: MICHAEL G. WIETOR PD 11/03/2008