## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 757745** 

FILED Apr 14, 2008 Secretary of State

Entity Name: BROWARD MODEL BOAT CLUB INC.

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

1220 SW 4 ST. 2231 HOLLYWOOD BLVD.
APT. I HOLLYWOOD, FL 33020

FORT LAUDERDALE, FL 33312 US

Current Mailing Address: New Mailing Address:

C/O FRED ROBSON

2549 E. SUNRISE BLVD.
FT. LAUDERDALE, FL 33304 US

C/O GENE SARDA
P.O.BOX 172004
HIALEAH, FL 33017 US

FEI Number: 65-0121933 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ROBSON, BOBBIE SARDA, GENE A
1220 SW 4 ST. 2231 HOLLYWOOD BLVD.
APT. I HOLLYWOOD, FL 33020 US

FORT LAUDERDALE, FL 33312 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.

SIGNATURE: GENE SARDA 04/14/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: VD ( ) Delete Title: PD (X) Change ( ) Addition Name: ROBSON, FRED Name: SARDA, GENE A

Address: 1220 SW 4TH STREET #1 Address: P.O.BOX 172004
City-St-Zip: FORT LAUDERDALE, FL 33312 US City-St-Zip: HIALEAH, FL 33017 US

Title: SD ( ) Delete Title: VD (X) Change ( ) Addition Name: PICKARD, RHONDA Name: MATLOCK, NOWEL

 Address:
 2286 LAKE OSBORNE DR. #12
 Address:
 1272 S.W.115 AVE.

 City-St-Zip:
 LAKE WORTH, FL 33461
 City-St-Zip:
 DAVIE, FL 33325

 Name:
 ROBSON, BOBBIE
 Name:
 RATOFF, RON

 Address:
 1220 SW 4TH STREET #1
 Address:
 2512 S.W.55 STREET

 City-St-Zip:
 FORT LAUDERDALE, FL 33312 US
 City-St-Zip:
 DANIA, FL 33312 US

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

 Name:
 RATOFF, RON
 Name:
 CAMPBELL, MKE

 Address:
 3211 N.W. 107TH DRIVE
 Address:
 805 S.E.19 STREET # 4

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 FT. LAUDERDALE, FL 33316

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: GENE SARDA PD 04/14/2008