

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765075

FILED
Apr 30, 2009
Secretary of State

Entity Name: T. J. REDDICK BAR ASSOCIATION, INC.

Current Principal Place of Business:

7101 W. COMMERCIAL BLVD
SUITE 4A
FORT LAUDERDALE, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1500
FT. LAUDERDALE, FL 33302 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

COWARD, KIMBERLY D
4723 NW 82ND AVE
LAUDERHILL, FL 33351 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: P () Delete
Name: COWARD, ALDREDA D
Address: 7101 W. COMMERCIAL BLVD, STE 4A
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D () Delete
Name: FRANCOIS, PHOEBEE
Address: 2787 E OAKLAND PARK BLVD STE 302
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: S () Delete
Name: JONES ADAMS, VERESA T
Address: 2400 E COMMERCIAL BLVD, STE 1100
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: T () Delete
Name: COWARD, KIMBERLY
Address: 7101 W. COMMERCIAL BLVD, STE 4A
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D () Delete
Name: WRIGHT MUIR, GHENETE
Address: PO BOX 450249
City-St-Zip: SUNRISE, FL 33345

Title: D () Delete
Name: PETTIS, YOHANCE
Address: 1 FINANCIAL PLZ FL 7
City-St-Zip: FORT LAUDERDALE, FL 33394

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FRANCOIS, PHOEBEE R
Address: 2787 E OAKLAND PARK BLVD STE 302
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: D (X) Change () Addition
Name: COWARD, ALFREDA D
Address: 7101 W. COMMERCIAL BLVD, STE 4A
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: S (X) Change () Addition
Name: ROBINSON, VERONICA
Address: 7101 W. COMMERCIAL BLVD, STE 4A
City-St-Zip: FORT LAUDERDALE, FL 33319

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: KIMBERLY D. COWARD

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date