

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765075

FILED  
May 04, 2010  
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 ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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:**

COWARD, KIMBERLY D  
7101 W. COMMERCIAL BLVD  
4A  
FORT LAUDERDALE, FL 33319 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:

05/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KOTEY, PHYLLIS  
Address: PO BOX 1500  
City-St-Zip: FORT LAUDERDALE, FL 33302

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

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

Title: T  
Name: BURRIS, MERTELLA  
Address: PO BOX 1500  
City-St-Zip: FORT LAUDERDALE, FL 33302

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

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

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: ALFREDA D COWARD

D

05/04/2010

Electronic Signature of Signing Officer or Director

Date