

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004932

FILED  
Jan 05, 2005  
Secretary of State

**Entity Name:** FAIR CAMPAIGN PRACTICES COMMITTEE OF BROWARD COUNTY, INC.

**Current Principal Place of Business:**

C/O THE COORDINATING COUNCIL OF BROWARD  
6301 NW 5TH WAY - SUITE 3000  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THE COORDINATING COUNCIL OF BROWARD  
6301 NW 5TH WAY - SUITE 3000  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

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

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

JOHNSTON, ROBERT  
1520 NE 30TH PLACE  
OAKLAND PARK, FL 33334 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: D ( ) Delete  
Name: ROGERS, ROY  
Address: 1051 SE 3RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: PAYNE, WINGATE  
Address: 1116 PONCEDELEON DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: JOHNSTON, ROBERT  
Address: 1520 NE 30TH PLACE  
City-St-Zip: OAKLAND PARK, FL 33334

Title: D ( ) Delete  
Name: WALKER, FRANK C  
Address: 600 NE THIRD AVE.  
City-St-Zip: FT LAUDERDALE, FL 33304

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT JOHNSTON

D

01/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date