2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2011
Secretary of State

DOCUMENT# N00206

Entity Name: BROWARD COUNTY RETIRED EDUCATORS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

615 N 31 ROAD
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

615 N 31 ROAD
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 02-0735129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LECLERC, MARELISE
615 N 31 ROAD
HOLLYWOOD, FL 33021 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: PD
Name: FALCONER, MARGARITE
Address: 1625 SE 10 AVENUE, APT. 503
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SD
Name: WALKER, JOSHEPHINE
Address: 11901 NW 29 STREET
City-St-Zip: SUNRISE, FL 33323

Title: TD
Name: LECLERC, MARELISE
Address: 615 N 31 ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: VPD
Name: MORNINGSTAR, BARBARA
Address: 4530 NE 14 TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

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: MARELISE LECLERC TD 03/18/2011
Electronic Signature of Signing Officer or Director Date