## 2005 NOT-FOR-PROFIT CORPORATION

## **FILED** Jan 18, 2005 8:00 am **Secretary of State**

01-18-2005 90110 025 \*\*\*\*70.00

	REPORT	

**DOCUMENT # N00862** YOUNG MEN'S CHRISTIAN ASSOCIATION OF BROWARD COUNTY, FLORIDA, INC. Principal Place of Business Mailing Address 1830 WEST BROWARD BLVD. 1830 WEST BROWARD BLVD. 50003219 FT LAUDERDALE, FL 33312 FT LAUDERDALE, FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 Chg-NP CR2E037 (10/03) 4. FEI Number 59-0624463 City & State City & State Applied For Not Applicable Ζiρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JEZEK, MICHAEL E 1830 WEST BROWARD BLVD. Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE, FL 33312 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be П Due by May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Defete TITLE □ Change X Addition LOCHRIE, ROBERT SMAIN NAME Michael Jezek STREET ADDRESS 200 EAST BROWARD BLVD #15TH FL STREET ADDRESS 1830 W. Breward Blud. CITY-ST-ZIP FT LAUDERDALE, FL 33301 CITY-ST-ZIP Alanderdale, AL 33312 PC Addition TITLE Detete TITLE ☐ Change Lindsey Paune PRADO, MARTA NAME NAME 1830 W. BROWARD Blud. STREET ADDRESS 1900 NW 32 STREET STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33064 CITY-ST-ZIP FI. Laudendale, EL 33312 PC Addition TITLE Delete TITLE R Change BENSON, ROLAND Mark Renetski NAME NAME STREET ADDRESS **303 SE 17 STREET** STREET ADDRESS 1830 W. BROWARD Blvd. CITY-ST-7IP FT LAUDERDALE, FL 33316 CITY-ST-7IP A-Lundendale, AL TITLE -Delete TITLE ☐ Change ☐ Addition REPETSKI, MARK NAME NAME STREET ADDRESS 200 E. L'AS OLAS BLVD. STREET ADDRESS FORT LAUDERDALE, FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE TD ☐ Detete TITLE Change Addition KOCH, JEFF NAME NAME STREET ADDRESS 4700 SHERIDAN STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME JEZEK, MICHAEL E NAME STREET ADDRESS 5100 NORTH FEDERAL HIGHWAY #300B STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33308 CITY-ST-ZIP ed with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information eport is for and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director compart reflect as execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supply upplemental report is beiver or trostor officer indicated on this report of the corporation or the i changed, or on an attach Yanidat SIGNATURE: SIGNATURE AND TYPED OR P