

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000460

FILED
Mar 30, 2009
Secretary of State

Entity Name: BROWARD COUNTY WOMEN'S AMATEUR CHAMPIONSHIP, INC.

Current Principal Place of Business:

64 ISLA BAHIA DRIVE
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

64 ISLA BAHIA DRIVE
FORT LAUDERDALE, FL 33316 US

Current Mailing Address:

64 ISLA BAHIA DRIVE
FORT LAUDERDALE, FL 33316

New Mailing Address:

64 ISLA BAHIA DRIVE
FORT LAUDERDALE, FL 33316 US

FEI Number: 65-1077844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RATCLIFFE, CAROLE R
64 ISLA BAHIA DRIVE
FORT LAUDERDALE, FL 33316 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: RATCLIFFE, CAROLE R
Address: 64 ISLA BAHIA DR
City-St-Zip: FT LAUDERDALE, FL 33316

Title: O () Delete
Name: LITTLE, LAURIE
Address: 2613 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

Title: O () Delete
Name: SPONDER, LESLIE
Address: 5311 SW 117 TERRACE
City-St-Zip: COOPER CITY, FL 33330

Title: O () Delete
Name: WEBER, MARIANNE
Address: 1 SENECA RD
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RATCLIFFE, CAROLE R
Address: 64 ISLA BAHIA DR
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: O (X) Change () Addition
Name: LITTLE, LAURIE
Address: 2613 OAKBROOK CT
City-St-Zip: WESTON, FL 33332 US

Title: O (X) Change () Addition
Name: SPONDER, LESLIE
Address: 5311 SW 117 TERRACE
City-St-Zip: COOPER CITY, FL 33330 US

Title: O (X) Change () Addition
Name: WEBER, MARIANNE
Address: 1 SENECA RD
City-St-Zip: FT LAUDERDALE, FL 33308 US

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: MARIANNE WEBER

O

03/30/2009

Electronic Signature of Signing Officer or Director

Date