

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002151

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: OIC OF BROWARD COUNTY, INC.

## Current Principal Place of Business:

2800 WEST OAKLAND PARK BLVD  
300  
FORT LAUDERDALE, FL 33311 US

## New Principal Place of Business:

## Current Mailing Address:

2800 WEST OAKLAND PARK BLVD  
300  
FORT LAUDERDALE, FL 33311 US

## New Mailing Address:

FEI Number: 65-1117147      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ALLEN, W. GEORGE ESQUIRE  
800 SE THIRD AVENUE, THE PENTHOUSE  
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: DP ( ) Delete  
Name: ALLEN, GEORGE ESQ  
Address: 800 SOUTH EAST THIRD AVENUE, PENTHOUSE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: COLE, ADA  
Address: 10 NURMI DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DT ( ) Delete  
Name: IRA, COR  
Address: 2800 WEST OAKLAND PARK BLVD, SUITE 300  
City-St-Zip: OAKLAND PARK, FL 33311 13

Title: DV ( ) Delete  
Name: HORNE, EARLENE  
Address: 8939 NW 44TH COURT  
City-St-Zip: SUNRISE, FL 33313

Title: D ( ) Delete  
Name: SANON, NEWTON  
Address: 2800 WEST OAKLAND PARK BLVD  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DS ( ) Delete  
Name: CARL, FLEMISTER  
Address: 6316 LONG KEY LANE  
City-St-Zip: BOYNTON BEACH, FL 33437

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: GEDDES, AINSWORTH  
Address: 2800 WEST OAKLAND PARK BLVD, SUITE 300  
City-St-Zip: OAKLAND PARK, FL 33311 13

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 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: NEWTON SANON

ED

01/05/2009

Electronic Signature of Signing Officer or Director

Date