2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2009
Secretary of State

DOCUMENT# N02000003774

Entity Name: SOUTH FLORIDA HUMAN RIGHTS COUNCIL INC.

Current Principal Place of Business:

6804 NORTH WEST 29TH PLACE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6804 NORTH WEST 29TH PLACE
MARGATE, FL 33063

New Mailing Address:

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

Name and Address of Current Registered Agent:

KANE, DOUGLAS J
6804 NORTH WEST 29TH PLACE
MARGATE, FL 33063 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:	MOSELY, SHERMAN	
Address:	410 SW 31ST AVENUE	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	EVP	( ) Delete
Name:	KANE, DOUGLAS J	
Address:	110 SUNDIAL CIRCLE A	
City-St-Zip:	MARGATE, FL 33068	
Title:	S	( ) Delete
Name:	CAMPBELL, PEGGY	
Address:	6230 SW 26 STREET	
City-St-Zip:	MIRAMAR, FL 33023	
Title:	T	( ) Delete
Name:	ALVAREZ, MERCEDES	
Address:	3 NORTH CAROL BOULEVARD	
City-St-Zip:	MARGATE, FL 33068	
Title:	C	( ) Delete
Name:	TITTMANN, BERNARD T	
Address:	4200 HILLCREST DR. APT. 418	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	VC	( ) Delete
Name:	TROUTMAN, TOMMY BISHOP	
Address:	2210 WEST OAKLAND PARK BLVD.	
City-St-Zip:	OAKLAND PARK, FL 33311	

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:	
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: DOUGLAS J. KANE VP 02/07/2009

Electronic Signature of Signing Officer or Director — Date