2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004
Secretary of State

DOCUMENT# N02000004937

Entity Name: BROWARD COUNTY LANDLORDS ASSOCIATION INC.

Current Principal Place of Business:

8295 NW 8 PL
CORAL SPRING, FL 33071

New Principal Place of Business:

Current Mailing Address:

8295 NW 8 PL
CORAL SPRING, FL 33071

New Mailing Address:

FEI Number: 30-0093319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRIZE, ALEX
8295 NW 8 PL
CORAL SPRING, FL 33071

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 ( ) Delete
Name: PRIZE, ALEX
Address: 8295 NW 8 PL
City-St-Zip: CORAL SPRING, FL 33071

Title: VD ( ) Delete
Name: SHARF, DENISE C
Address: 4440 NW 65 STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: STD ( ) Delete
Name: PRIZE, IRIT
Address: 8295 NW 8 PL
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D ( ) Delete
Name: BESTENI, ALBY
Address: 4440 NW 65 STREET
City-St-Zip: COCONUT CREEK, FL 33073

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEX PRIZE PD 05/17/2004

Electronic Signature of Signing Officer or Director — Date