

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004937

FILED  
Feb 03, 2006  
Secretary of State

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: ERIC, WILLNER  
Address: P.O.BOX 273730  
City-St-Zip: BOCA RATON, FL 33427

Title: VD (X) Change ( ) Addition  
Name: ERIC, FILKINS  
Address: 440 S. FEDERAL HWY., STE 204  
City-St-Zip: DEERFIELD BEACH, FL 33441

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 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: ALEX PRIZE

MEMB

02/03/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date