2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2003 8:00 am
Secretary of State
02-10-2003 90226 048 ****61.25

DOCUMENT # N02000005077

1. Entity Name
BROWARD ALLIANCE FOR NEIGHBORHOOD DEVELOPMENT, I NC.

Principal Place of Business	Mailing Address
200 E LAS OLAS BLVD. STE 1900 FT LAUDERDALE FL 33301	200 E LAS OLAS BLVD. STE 1900 FT LAUDERDALE FL 33301

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 30-0102081 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLEMAN, WILLIAM T ESQ. BRINKLEY, MCNERNEY, MORGAN, SOLOMON & TATU 200 E LAS OLAS BLVD, STE 1900 FT LAUDERDALE FL 33301	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRY, KATHARINE 2665 NE 26 TERR FT LAUDERDALE FL 33306	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Katharine Barry 3741 N. Fed. Hwy Suite #403 Ft. Lauderdale, Fla. 33306 Director & President ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARTER, JERRY 1399 STIRLING RD DANIA FL 33004	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Angela Galloway 1061 N. Oakland Pk. Blvd. Dir. & V.P. Suite # 301 Ft. Lauderdale, FL 33306 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WEISS, SUZANNE PO BOX 1238 FT LAUDERDALE FL 33302	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Same! ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ROGERS-CHERRY, LISA 1214 NE 4 AVE FT LAUDERDALE FL 33304	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Myron Jackson 8440 NW 50th St. Coral Springs, FL 33067 Dir. & Treas. ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED, Pres. 1-28-03 (954) 563-5454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #