

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009776

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: BROWARD AQUATICS PARENT BOOSTER CLUB INC.

## Current Principal Place of Business:

19501 E. ST. ANDREWS DRIVE  
HIALEAH, FL 33015

## New Principal Place of Business:

1560 SW 119TH TER  
DAVIE, FL 33325

## Current Mailing Address:

19501 E. ST. ANDREWS DRIVE  
HIALEAH, FL 33015

## New Mailing Address:

1560 SW 119TH TER  
DAVIE, FL 33325

FEI Number: 11-3657516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHORKEY, MARTIN  
2201 NORTH 50 AVENUE  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

SGRIGNOLI, DIANNE  
2366 QUAIL ROOST DR  
WESTON, FL 33327 US

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: DIANNE SGRIGNOLI

04/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SHORKEY, MARTIN  
Address: 2201 NORTH 50 AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete  
Name: GORENA, RICO  
Address: 4251 SW 21 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33317

Title: SD ( ) Delete  
Name: BARON, JACKIE  
Address: 10354 BASILIA STREET  
City-St-Zip: COOPER CITY, FL 33026

Title: T ( ) Delete  
Name: HAEFFNER, TERRI  
Address: 19501 E. ST. ANDREWS DRIVE  
City-St-Zip: HIALEAH, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILLIAMSON, LORAIN  
Address: 1560 SW 119TH TER  
City-St-Zip: DAVIE, FL 33325

Title: VD (X) Change ( ) Addition  
Name: GORENA, JENNIE  
Address: 4251 SW 21 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33317

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

Title: T (X) Change ( ) Addition  
Name: SGRIGNOLI, DIANNE  
Address: 2366 QUAIL ROOST DR  
City-St-Zip: WESTON, FL 33327

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: DIANNE SGRIGNOLI

RA

04/27/2005

Electronic Signature of Signing Officer or Director

Date