

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004234

FILED  
May 06, 2007  
Secretary of State

**Entity Name:** BROWARD COUNTY, REGION X, CISM, INC.

**Current Principal Place of Business:**

11776 W SAMPLE RD, STE 104  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

11776 W SAMPLE RD, STE 104  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 27-0092150      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

DE GAGLIA, JOHN  
11095 NW 17 PLACE  
CORAL SPRINGS, FL 33071      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S      ( ) Delete  
Name: DOWNEY, JULIE  
Address: 6901 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33314

Title: T      ( ) Delete  
Name: BENNETT, LEE S  
Address: 10100 PINES BLVD  
City-St-Zip: HOLLYWOOD, FL 33026

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: D      (X) Change ( ) Addition  
Name: SCHWEINLER, PAUL J  
Address: 11776 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T      ( ) Change (X) Addition  
Name: DE GAGLIA, JOHN  
Address: 11095 NW 17TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33071

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: PAUL J SCHWEINLER

D

05/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date