2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N05000002060

Entity Name: TAMARAC ECONOMIC DEVELOPMENT FOUNDATION, INC.

Current Principal Place of Business:

7525 NW 88TH AVE
RM 202
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

7525 NW 88TH AVE
RM 202
TAMARAC, FL 33321

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BERNS, ANDREW D
7525 NW 88TH AVE
RM 202
TAMARAC, FL 33321 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: D ( ) Delete
Name: KOENIG, KEITH
Address: 6701 N HIATUS RD
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: MIJARES, ANTHONY
Address: 7975 NW 154 STREET #1400
City-St-Zip: MIAMI LAKES, FL 33016

Title: D ( ) Delete
Name: HAWTHORN, RON
Address: 7435 WOODMONT TR #104
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: CHESSER, SUZANNE
Address: 5604 NW 84TH TERR
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: CRAIG, HEATHER
Address: 7900 N UNIVERSITY DR
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: GADSON, GEORGE
Address: 8834 NW 75TH CT
City-St-Zip: TAMARAC, FL 33321

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:

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 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: RONALD HAWTHORN D 04/07/2009
Electronic Signature of Signing Officer or Director — Date