

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006182

FILED
Mar 13, 2009
Secretary of State

Entity Name: BROWARD LADY CANES, INC.

Current Principal Place of Business:

171 S HIBISCUS CT
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

171 S HIBISCUS CT
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 03-0563865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, JAMES
171 S HIBISCUS COURT
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

FORD, JAMES E PRES
171 S HIBISCUS COURT
PLANTATION, FL 33317 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: JAMES E. FORD

03/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WINER, DAVID
Address: 171 S HIBISCUS CT
City-St-Zip: PLANTATION, FL 33317

Title: VTD () Delete
Name: FORD, JAMES
Address: 171 S HIBISCUS CT
City-St-Zip: PLANTATION, FL 33317

Title: SD () Delete
Name: HOYOS-MALDONADO, SANDRA
Address: 171 S HIBISCUS CT
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FORD, JAMES E
Address: 171 S HIBISCUS CT
City-St-Zip: PLANTATION, FL 33317

Title: VSEC (X) Change () Addition
Name: CORREA, DAVID
Address: 3301 OVERLOOK ROAD
City-St-Zip: DAVIE, FL 33328

Title: TR (X) Change () Addition
Name: HOYOS-ALFONSO, SANDRA
Address: 655 CONSERVATION DRIVE
City-St-Zip: WESTON, FL 33327

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: JAMES E. FORD

PRES

03/13/2009

Electronic Signature of Signing Officer or Director

Date