2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# N06000001273

Entity Name: BROWARD LEAGUE OF MAYORS, INC.

Current Principal Place of Business:

115 S. ANDREWS AVENUE
SUITE 122
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

115 S. ANDREWS AVENUE
SUITE 122
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 20-4974725 **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:

GOREN, SAMUEL S
GOREN, CHEROF, DOODY & EZROL, P.A.
3099 E. COMMERCIAL BLVD., SUITE 200
FORT LAUDERDALE, FL 33308 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: P ( ) Delete
Name: MOSELEY, LORI
Address: 115 S ANDREWS AVE #122
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V ( ) Delete
Name: COOPER, JAY
Address: 115 S ANDREWS AVE #122
City-St-Zip: FORT LAUDERDALE, FL 33301

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: COOPER, JOY
Address: 115 S ANDREWS AVE #122
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S ( ) Change (X) Addition
Name: RESNICK, GARY
Address: 115 SOUTH ANDREWS AVENUE, #122
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T ( ) Change (X) Addition
Name: ARMSTRONG, RAE CAROLE
Address: 115 SOUTH ANDREWS AVENUE, #122
City-St-Zip: FORT LAUDERDALE, FL 33301

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: RHONDA CALHOUN ED 06/23/2009
Electronic Signature of Signing Officer or Director — Date