## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006553

FILED Apr 27, 2009 Secretary of State

Entity Name: BROWARD BAHAMIAN AMERICAN ASSOCIATION INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 621 N.W. 5TH AVENUE HALLANDALE BEACH, FL 33009 **Current Mailing Address: New Mailing Address:** PO BOX 1706 HALLANDALE BEACH, FL 330081706 FEI Number: 39-2061633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEAN, CEDRIC 621 N.W. 5TH AVENUE HALLANDALE BEACH, FL 33009 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DEAN, CEDRIC Name: Name: 621 N.W. 5TH AVENUE Address: Address: City-St-Zip: HALLANDALE BCH, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: INGRAHAM, EDITH Name: Address: 620 N.W. 1ST AVENUE Address: City-St-Zip: HALLANDALE BCH, FL City-St-Zip: Title: () Delete Title: TDSD (X) Change ( ) Addition GREEN, JENNIFER Name: GREEN, JENNIFER Name: 2311 CODY STREET Address: Address: 2311 CODY STREET City-St-Zip: HOLLYWOOD, FL City-St-Zip: HOLLYWOOD, FL Title: SD (X) Delete Title: () Change () Addition Name: SCOTT, JOANNE Name: Address: 609 N.W. 4TH AVENUE Address: City-St-Zip: HALLANDALE BCH, FL 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: CEDRIC DEAN PD 04/27/2009