

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006395

FILED
Apr 21, 2009
Secretary of State

Entity Name: BROWARD COUNTY BOARD OF REALTORS, INC.

Current Principal Place of Business:

701 PROMENADE DR.
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

701 PROMENADE DR.
PEMBROKE PINES, FL 33026

New Mailing Address:

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

Name and Address of Current Registered Agent:

VALDEZ, WILLIAM
701 PROMENADE DR.
PEMBROKE PINES, FL 33026 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: PD () Delete
Name: TERSINI, JOAN
Address: 600 N PINE ISLAND ROAD SUITE 150
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: VD () Delete
Name: CHINELLY, JIM SR
Address: 5400 S UNIVERSITY DR #604
City-St-Zip: DAVIE, FL 33328

Title: SD () Delete
Name: SARLEY, DONALD
Address: 4624 HOLLYWOOD BLVD SUITE 203
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: SMITH, JOANN
Address: 5870 S FLAMINGO ROAD
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: AGUDO, MARTI
Address: 10400 GRIFFIN ROAD, #303B
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: CHINELLY, JIM SR.
Address: 5400 S. UNIVERSITY DR., SUITE 604
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WIETOR, MICHAEL
Address: 10400 GRIFFIN ROAD, #303B
City-St-Zip: DAVIE, FL 33328

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

Title: TD (X) Change () Addition
Name: SARLEY, DONALD
Address: 4624 HOLLYWOOD BLVD SUITE 203
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD (X) Change () Addition
Name: GRANT, ARCHIBALD
Address: 1464 S PALM AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025

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

Title: D (X) Change () Addition
Name: MARKOWITZ, FRAN
Address: C/O 3100 STIRLING ROAD
City-St-Zip: HOLLYWOOD, FL 33021

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: JIM CHINELLY, SR.

VD

04/21/2009

Electronic Signature of Signing Officer or Director

Date