

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008484

FILED
Feb 27, 2009
Secretary of State

Entity Name: BROWARD WOMEN'S SOCCER LEAGUE CORP.

Current Principal Place of Business:

9501 SHERIDAN ST.,
COOPER CITY, FL 33024

New Principal Place of Business:

9501 SHERIDAN ST,
COOPER CITY, FL 33024

Current Mailing Address:

11991 SW 51 COURT
COOPER CITY, FL 33330

New Mailing Address:

20430 SW 1ST ST
PEMBROKE PINES, FL 33029

FEI Number: 26-0801683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUJICA, TERESA
11991 SW 51 COURT
COOPER CITY, FL 33330 US

Name and Address of New Registered Agent:

MACRAE, CARMEN A
20430 SW 1ST STREET
PEMBROKE PINES, FL 33029 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: ALBANIA MACRAE

02/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MACRAE, CARMEN A
Address: 20430 SW 1ST ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP () Delete
Name: REEVES, JENNIFER
Address: 10431 NW 24TH CT
City-St-Zip: SUNRISE, FL 33322

Title: SECR () Delete
Name: ANSOURIAN, JEAN
Address: 11361 NW 16 STREET
City-St-Zip: PEMBROKE PINES, FL 33026

Title: TREA () Delete
Name: FERGUSON-PITTERS, TRUDY
Address: 15530 NW 12TH COURT
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change () Addition
Name: MACRAE, CARMEN A
Address: 20430 SW 1ST ST
City-St-Zip: PEMBROKE PINES, FL 33029

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

Title: SECR (X) Change () Addition
Name: PUDSEY, JENNIFER
Address: 7050 SW 42 COURT
City-St-Zip: DAVIE, FL 33314

Title: PRES (X) Change () Addition
Name: BARQUIN, ERICKA M
Address: 513 SW 56 AV.
City-St-Zip: MIAMI, FL 33134

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: ALBANIA MACRAE

TREA

02/27/2009

Electronic Signature of Signing Officer or Director

Date