2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011820

FILED Apr 29, 2008 Secretary of State

Entity Name: BROWARD ATTORNEY'S REAL ESTATE COUNCIL, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	RTH ANDREWS AVE JDERDALE, FL 333112514			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
	RTH ANDREWS AVE JDERDALE, FL 333112514			
FEI Number	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
2850 NOR FORT LAI	R, C. CHRISTIAN ESQ RTH ANDREWS AVE UDERDALE, FL 333112514 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its register	red office or registered agent, or both,	
SIGNATU				
	Electronic Signature of Registered A	gent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete ANDERSON, GAILA 4500 W OAKLAND PARK BLVD SUITE 101 LAUDERDALE LAKES, FL 33313	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address:	D () Delete COON, THOMAS 888 SOUTH ANDREWS AVENUE FT LAUDERDALE, FL 33316	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	COON, THOMAS 888 SOUTH ANDREWS AVENUE	Name: Address:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	COON, THOMÁS 888 SOUTH ANDREWS AVENUE FT LAUDERDALE, FL 33316 D () Delete GRANADO, GISELA 10097 CLEARY BLVD SUITE 373	Name: Address: City-St-Zip: Title: Name: Address:		
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	COON, THOMAS 888 SOUTH ANDREWS AVENUE FT LAUDERDALE, FL 33316 D () Delete GRANADO, GISELA 10097 CLEARY BLVD SUITE 373 PLANTATION, FL 333241065 D () Delete GROUND, TAD 2455 E SUNRISE BLVD SUITE 610	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition	

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: C. CHRISTIAN SAUTTER, ESQ. D 04/29/2008