

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012345

FILED
Mar 19, 2009
Secretary of State

Entity Name: BROWARD COUNTY ASSOCIATION FOR HEALTH, PHYSICAL EDUCATION, DANCE AND SPORT, INC.

Current Principal Place of Business:

8147 SAN CARLOS CIRCLE
TAMARAC, FL 333211013

New Principal Place of Business:

Current Mailing Address:

8147 SAN CARLOS CIRCLE
TAMARAC, FL 333211013

New Mailing Address:

FEI Number: 65-0513826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, MELISSA
8147 SAN CARLOS CIRCLE
TAMARAC, FL 333211013 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: DP () Delete
Name: TORAKIS, FARRAH
Address: 7201 JOHNSON ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: DP () Delete
Name: PEREZ, MELISSA
Address: 8147 SAN CARLOS CIRCLE
City-St-Zip: TAMARAC, FL 333211013

Title: DT () Delete
Name: WHEATON, TROY
Address: 1601 SE 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: DS () Delete
Name: MORRIS, LYNN
Address: 6901 NW 16TH STREET
City-St-Zip: PLANTATION, FL 33313

Title: D () Delete
Name: ENGEL, JENISE
Address: 1200 NW 80TH AVE, 207
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: MELISSA PEREZ

CEO

03/19/2009

Electronic Signature of Signing Officer or Director

Date