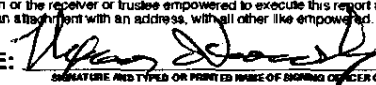


FILED  
Apr 28, 2003 8:00 am  
Secretary of State

04-28-2003 91435 021 \*\*\*\*61.25

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # N08426</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                          |                                                        |                                                                                                                                                        |
| 1. Entity Name<br><b>BROWARD SHERIFF'S ADVISORY COUNCIL, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |
| Principal Place of Business<br>2929 E. COMMERCIAL BLVD<br>SUITE 409<br>FORT LAUDERDALE, FL 33308 US                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                          | Mailing Address<br>8930 STATE ROAD 84<br>316<br>DAVE, FL 33324 US                                                                       |                                                                                                                                                        |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                          | 3. Mailing Address                                                                                                                      |                                                                                                                                                        |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                          | Suite, Apt. #, etc.                                                                                                                     |                                                                                                                                                        |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                          | City & State                                                                                                                            |                                                                                                                                                        |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country                                                                                                                  | Zip                                                                                                                                     | Country                                                                                                                                                |
| 4. FEI Number<br><b>59-2600022</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                          | Applied For<br>Not Applicable                                                                                                           |                                                                                                                                                        |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                          | \$8.75 Additional<br>Fee Required                                                                                                       |                                                                                                                                                        |
| 6. Name and Address of Current Registered Agent<br><b>MR. HYMAN INDOWSKY<br/>2929 E. COMMERCIAL BLVD.<br/>SUITE 409<br/>FORT LAUDERDALE, FL 33308</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                          | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code |                                                                                                                                                        |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when submitting)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |
| FILE NOW: FEE IS \$61.25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                          | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be<br>Added to Fees                      |                                                                                                                                                        |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                          | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                   |                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>NIEHAUS, ROBERT<br>6960 NE 28TH AVE<br>FT. LAUDERDALE, FL 33308 <input type="checkbox"/> Delete                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>INDOWSKY, HYMAN<br>2929 E. COMMERCIAL BLVD SUITE 409<br>FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>CYKTOR, LOUIS<br>2510 DEL LAGO DRIVE<br>FORT LAUDERDALE, FL 33316 <input type="checkbox"/> Delete                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>STEPHENS, JAMES<br>200 FIESTA WAY<br>FT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>STRICKLAND, WILTON<br>2897 N.E. 25TH STREET<br>FORT LAUDERDALE, FL 33306 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | Director<br>Alan Stotsky<br>400 Isle of Palms<br>FT. LAUDERDALE, FL 33301 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>YOUNG, HARVEY<br>424 ROYAL PLAZA DR<br>FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                      |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |
| SIGNATURE:  Hyman Indowsky 4/24/03, 954-491-1950                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                          |                                                                                                                                         |                                                                                                                                                        |

CR2E037 (10/02)