

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13654

**FILED**  
**Apr 30, 2004**  
**Secretary of State****Entity Name:** BROWARD COUNTY LIBRARY ASSOCIATION, INC.**Current Principal Place of Business:**P.O. BOX 1082  
FT. LAUDERDALE, FL 33302**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 1082  
FT. LAUDERDALE, FL 33302**New Mailing Address:****FEI Number:** 65-0119974      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DELFIELD, JEFFREY  
100 S ANDREWS AVE  
FT LAUDERDALE, FL 33301      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: D      ( ) Delete  
Name: MANNERS, LISA  
Address: 8601 W BROWARD BLVD  
City-St-Zip: PLANTATION, FL 33324

Title: VD      ( ) Delete  
Name: LINDENFELD, ELLEN  
Address: 16835 SHERIDAN ST  
City-St-Zip: PEMBROKE PINES, FL 33331

Title: S      ( ) Delete  
Name: DRAPER, WAYNE  
Address: 100 S. ANDREWS  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TD      ( ) Delete  
Name: DELFIELD, JEFFREY  
Address: 100 S ANDREWS  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: PD      ( ) Delete  
Name: RUSSO, CAROL  
Address: 2600 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D      ( ) Delete  
Name: METZGER, LEONA  
Address: 8601 W BROWARD BLVD  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD      (X) Change ( ) Addition  
Name: POLLACK, NEIL  
Address: 4600 S.W. 82 AVENUE  
City-St-Zip: DAVIE, FL 33328

Title: PD      (X) Change ( ) Addition  
Name: LINDENFELD, ELLEN  
Address: 16835 SHERIDAN ST  
City-St-Zip: PEMBROKE PINES, FL 33331

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

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

Title: D      (X) Change ( ) Addition  
Name: RUSSO, CAROL  
Address: 2600 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33020

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JEFFREY DELFIELD

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date