2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15527

FILED Jan 19, 2009 Secretary of State

Entity Name: NORTH BROWARD BAR ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1500 E. ATLANTIC SUITE B

POMPANO BEACH, FL 33060 US

New Mailing Address: Current Mailing Address:

1500 E. ATLANTIC SUITE B

POMPANO BEACH, FL 33060 US

FEI Number: 65-0775391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUSE, STUART N OATES, THOMAS D

6451 N. FEDERAL HIGHWAY 1500 EAST ATLANTIC BLVD

STE 806 STE B

FT. LAUDERDALE, FL 33308 US POMPANO BEACH, FL 33060 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: THOMAS D. OATES. ESQ, 01/19/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

FISHMAN, ALAN STUART, HOUSE N ESQ. Name: Name: 2301 W. SAMPLE RD. BLD. 4 STE 1A Address: 6451 N. FEDERAL HIGHWAY STE 806 Address:

City-St-Zip: POMPANO BEACH, FL 33071 US City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: () Delete Title: (X) Change () Addition Name: HOUSE, STUART Name: OATES, THOMAS D ESQ.

Address: 6451 N. FEDERAL HIGHWAY STE 806 Address: 1500 EAST ATLANTIC BLVD STE B City-St-Zip: FT. LAUDERDALE, FL 33308 US City-St-Zip: POMPANO BEACH, FL 33060 US

Title: () Delete Title: (X) Change () Addition OATES, THOMAS D Name: DAIRE, ANDREW J ESQ. Name:

1500 EAST ATLANTIC BLVD, STE B Address: Address: PO BOX 2507

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: BOCA RATON, FL 33427

Title: () Delete Title: () Change (X) Addition STEVENSON, WILMA D ESQ. Name: Name: 7111 NW 45TH ST Address: Address: City-St-Zip: City-St-Zip: LAUDERHILL, FL 33319

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: THOMAS D OATES, ESQ. VP 01/19/2009