

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16801

FILED
Apr 28, 2008
Secretary of State

Entity Name: GIRL SCOUTS OF BROWARD COUNTY, INC.

Current Principal Place of Business:

4701 NW 33RD AVE
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

4701 NW 33RD AVE
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 59-0657327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOREN, SAMUEL S
3099 E. COMMERCIAL BLVD.
SUITE #200
FT. LAUDERDALE, FL 33308 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: FVPD () Delete
Name: RAVINDRAN, SHEILA H
Address: 6734 W. SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33067

Title: TD () Delete
Name: MICHELSON, CHARLES
Address: 3501 GRIFFIN ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: PD () Delete
Name: HOLSTEIN, JILL
Address: 1122 NW 118 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: ROTH, LESLIE
Address: 4701 NW 33RD AVE
City-St-Zip: OAKLAND PARK, FL 33309

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:

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: LESLIE ROTH

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date