2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N17798

Entity Name: THE NORTH BROWARD FEDERATED WOMEN'S CLUB, INC.

Current Principal Place of Business:

120 NW 15TH PLACE
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

120 NW 15TH PLACE
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HODGE, GWENDDYN L
120 NW 15TH PLACE
POMPANO BCH, FL 33060 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: P ( ) Delete
Name: HODGE, GWENDOLYN L
Address: 120 NW 15TH PLACE
City-St-Zip: POMPANO BEACH, FL 33060

Title: V ( ) Delete
Name: GROOMS, LILLIE
Address: 608 NW 21ST COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: FSD ( ) Delete
Name: MCDOUGAL, CAROLYN
Address: 710 NW 17TH COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD ( ) Delete
Name: COOPER, CHERIAN,
Address: 222 N.W. 10TH AVE.
City-St-Zip: POMPANO BEACH, FL

Title: FG ( ) Delete
Name: SCRUGGS, LUCILLE
Address: 640 NW 15 MANOR
City-St-Zip: POMPANO BEACH, FL 33060

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: GWENDOLYN HODGE MS. 04/29/2008
Electronic Signature of Signing Officer or Director — Date