

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19822

FILED
Apr 25, 2006
Secretary of State

Entity Name: JUSTICE FOR ALL IN BROWARD, INC.

Current Principal Place of Business:

1400 SISTRUNK BLVD
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

1400 SISTRUNK BLVD
FT. LAUDERDALE, FL 33311 US

New Mailing Address:

FEI Number: 59-2750695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, FRED
1261 NW 24 AVENUE
POMPANO BEACH, FL 33069 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: VD () Delete
Name: WILKERSON, HERB
Address: 1881 NW 9 STREET
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: SD () Delete
Name: WARD, HENRY
Address: 267 NW 30 AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: PD () Delete
Name: WILSON, FRED E.
Address: 1261 NW 24 AVE
City-St-Zip: POMPANO BCH, FL 33069 US

Title: TD () Delete
Name: WILLIAMS, MAE OLLIE
Address: 728 NW 15 WAY
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: SD () Delete
Name: MARTIN, GLADYS
Address: 2830 SOMERSET DR #N 318
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: SD () Delete
Name: HOOKS, ALICE
Address: 2930 NW 19TH STREET, #5
City-St-Zip: FORT LAUDERDALE, FL 33311 US

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:

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 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: FRED E. WILSON, SR.

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date