2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22024

FILED Apr 17, 2007 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF MORTGAGE BROKERS - BROWARD CHAPTER, INC.

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

2860 W STATE ROAD 84 SUITE 103

FORT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

2860 W STATE ROAD 84 SUITE 103 FORT LAUDERDALE, FL 33312

FEI Number: 65-0137875 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:

LUKASIEVICH, MICHAEL 1720 HARRISON STREET SUITE 18A

HOLLYWOOD, FL 33020 US

KEATING, ROBERT 2911 E COMMERCIAL BLVD FORT LAUDERDALE, FL 33308 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: ROBERT M KEATING 04/17/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 KEEN, RICHARD A
 Name:
 DOERR, MARGA E

 Name:
 REEN, RICHARD A
 Name:
 DOERR, MARGA E

 Address:
 1834 N UNIVERSITY DRIVE
 Address:
 9745 SUNSET DR #225

 City-St-Zip:
 PLANTATION, FL 33322 US
 City-St-Zip:
 MIAMI, FL 33173 US

Title: () Delete Title: (X) Change () Addition KEATING, ROBERT M Name: KEEN, RICHARD A Name: Address: 2911 EAST COMMERCIAL BLVD Address: 1218 N PINE HILLS RD City-St-Zip: FORT LAUDERDALE, FL 33308 US City-St-Zip: ORLANDO, FL 32808 US

Title: V () Delete Title: () Change () Addition

 Name:
 MULLIGAN, TINA
 Name:

 Address:
 11158 NW 19 STREET
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071 US
 City-St-Zip:

Name:DOERR, MARGAName:NANCY, SANDOVALAddress:9745 SUNSET DRIVE #225Address:1897 NW 128 TC.City-St-Zip:MIAMI, FL 33173 USCity-St-Zip:PEMBROKE PINES, FL 33028 US

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf (1) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change (1) Addition}$

Name: POLIANDRO, ROSEMARIE Name: WILNER, LIZ

 Address:
 2860 WEST STATE RD 84, SUITE 103
 Address:
 4100 NE 2 AVE, STE 206

 City-St-Zip:
 FORT LAUDERDALE, FL 33312 US
 City-St-Zip:
 MIAMI, FL 33137 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 SANDOVAL, NANCY
 Name:
 ELLINGSWORTH, SUSAN

 Address:
 1897 NW 128 TERRACE
 Address:
 4100 NE 2 AVE, STE 206

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 MIAMI, FL 33137

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: ROBERT M KEATING D 04/17/2007