2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25615

FILED Mar 31, 2004 Secretary of State

Entity Name: ARC BROWARD GUARDIANSHIP, INC.

Current Principal Place of Business: New Principal Place of Business: 10250 NW 53RD STREET SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** 10250 NW 53RD STREET SUNRISE, FL 33351 FEI Number: 65-0046681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAAS, DENNIS 10250 NW 53 STREET SUNRISE, FL 33351 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VCD () Change () Addition () Delete RICHTER, JACOB, Name: Name: 2600 NE 14TH ST CAUSEWAY Address: Address: City-St-Zip: POMPANO BEACH, FL City-St-Zip: Title: VCD () Delete Title: () Change () Addition Name: ROGERS, GORDON, Name: Address: 200 S. BISCAYNE BLVD., STE, 3600 Address: City-St-Zip: MIAMI, FL 331312338 City-St-Zip: Title: VCD () Delete Title: () Change () Addition LAYSTROM, C.WILLIAM,, JR. Name: Name: 1177 SE THIRD AVE. Address: Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: HAAS, DENNIS Name: 2150 SW 28TH AVE Address: Address: City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: Title: () Delete Title: () Change () Addition HINDEN, JOAN Name: Name: 9709 MALVERN DR Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Delete Title: (X) Change () Addition PATTISON, STEVE CHRETIEN, PETER Name: Name: Address: 303 SE 17TH STREET STE 610 Address: 2 ALHAMBRA PLAZA, STE 500 FORT LAUDERDALE, FL 33316 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GORDON ROGERS, ESQ VCD 03/31/2004