



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90482 035 ****61.25

DOCUMENT # N31737 1. Entity Name GREATER FORT LAUDERDALE SISTER CITIES INTERNATIONAL, INC					
Principal Place of Business 101 N.E. 3RD AVENUE SUITE 300 FT. LAUDERDALE, FL 33301			Mailing Address 101 N.E. 3RD AVENUE SUITE 300 FT. LAUDERDALE, FL 33301		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0194426	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIAMS, CHARLES V CPA 99 N.E. 17 COURT FT. LAUDERDALE, FL 33305			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P		TITLE	President	
NAME	CHANEY, MARVIN T		NAME	Martin J. Kurtz	
STREET ADDRESS	101 N.E. 3RD AVE, SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
TITLE	C		TITLE	VP/D	
NAME	MCCORMICK, NUCCIA		NAME	Ellisa Scott	
STREET ADDRESS	101 N.E. 3RD AVE., SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
TITLE	VP		TITLE	VP/D	
NAME	COOKE, LINDA		NAME	Coni Uzelec	
STREET ADDRESS	101 N.E. 3RD AVE., SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
TITLE	T		TITLE		
NAME	WILLIAMS, CHARLES V		NAME		
STREET ADDRESS	101 N.E. 3RD AVE., SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
TITLE	VP/D		TITLE	VP/D	
NAME	BENDER, CHARLENE		NAME	Pat Dumont	
STREET ADDRESS	101 N.E. 3RD AVE., SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
TITLE	S		TITLE		
NAME	WEIDMAN-MCGREGOR, BRENDA		NAME		
STREET ADDRESS	101 N.E. 3RD AVE., SUITE 300		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Charles V. Williams, Treasurer 4/30/05 (954) 828-4536		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		