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FILED

May 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N33150 (6)

1. Corporation Name

CENTURY 21 NORTH BROWARD COUNCIL, INC.

Principal Place of Business

7855 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065-4709
US

Mailing Address

2844 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065-1425
US3. Date Incorporated or Qualified
07/07/19893a. Date of Last Report
07/03/19964. FEI Number
65-0150139Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30
9. Name and Address of Current Registered AgentKIRKWOOD, ELAINE
7855 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD ☒ DELETE
NAME CROFT, TONY
STREET ADDRESS 5500 NORTH FEDERAL HIGHWAY
CITY-ST-ZIP BOCA RATON FL 33487TITLE PD ☒ DELETE
NAME COSBERG, HARVEY
STREET ADDRESS 1905 NORTH PINE ISLAND ROAD
CITY-ST-ZIP PLANTATION FL 33322TITLE SD ☐ DELETE
NAME GONZALEZ, ANNA
STREET ADDRESS 2728 DAVIE BOULEVARD
CITY-ST-ZIP FORT LAUDERDALE FL 33312TITLE TD ☐ DELETE
NAME KIRKWOOD, ELAINE
STREET ADDRESS 7855 WEST SAMPLE ROAD
CITY-ST-ZIP CORAL SPRINGS FL 33065-4709TITLE TD ☒ DELETE
NAME KIRKWOOD, ELAINE
STREET ADDRESS 7855 WEST SAMPLE ROAD
CITY-ST-ZIP CORAL SPRINGS FLTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PD ☐ Change ☒ Addition
12 NAME WINFIELD, MARIANNE
13 STREET ADDRESS 10109 CLEARY BOULEVARD
14 CITY-ST-ZIP PLANTATION, FL 3332421 TITLE VPD ☐ Change ☒ Addition
22 NAME REINHART, SCOTT
23 STREET ADDRESS 3251 NORTH FEDERAL HIGHWAY
24 CITY-ST-ZIP BOCA RATON, FL 3343131 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)