2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N38390

Entity Name: BROWARD NAVY DAYS, INC.

Current Principal Place of Business:

5300 N. FEDERAL HWY.
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

5300 NORTH FEDERAL HWY
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0248096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RYAN, CHRISTOPHER J
700 EAST DANIA BEACH BLVD.
DANIA, FL 33004 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:	C/D	( ) Delete
Name:	MILLSAPS, JOSEPH,	
Address:	5300 N FEDERAL HIGHWAY	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	( ) Delete
Name:	ANDERSON, PAUL	
Address:	2108 NE 18 AVENUE	
City-St-Zip:	FORT LAUDERDALE, FL 33305	
Title:	D	( ) Delete
Name:	DIEGO, ROMERO	
Address:	15065 NW 7 AVE	
City-St-Zip:	MIAMI, FL 33168	
Title:	D	( ) Delete
Name:	GRAY, MARY ANNE	
Address:	2101 NE 33 STREET	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	T/D	(X) Delete
Name:	MULLER, JULIE	
Address:	2841 N. OCEAN BLVD #1009	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	S	( ) Delete
Name:	HAIKO, PAULA	
Address:	4145 CYPRE3SS REACH COURT, # 505	
City-St-Zip:	POMPANO BEACH, FL 33069	

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 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: JOSEPH MILLSAPS D 04/30/2008

Electronic Signature of Signing Officer or Director — Date