

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39387

FILED
Apr 27, 2007
Secretary of State

Entity Name: SEMINOLE CLUB OF BROWARD COUNTY, INC.

Current Principal Place of Business:

PO BOX 030314
P. O. BOX 030314
FT LAUDERDALE, FL 33303 US

New Principal Place of Business:

2810 N E 52 STRET
FT LAUDERDALE, FL 33308 US

Current Mailing Address:

PO BOX 030314
FT LAUDERDALE, FL 33303 US

New Mailing Address:

FEI Number: 65-0208659 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WATSON, MICHAEL R
RODRIGUEZ, KINZBRUNNER, CONIGLIO & WATSON
4801 S. UNIVERSITY DRIVE
DAVIE, FL 33328 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: PRES () Delete
Name: HAGGERTY, MICHAEL
Address: 2611 EAST OAKLAND PARK BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL

Title: TREA () Delete
Name: WATSON, MICHAEL R
Address: 4801 S. UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33328

Title: SECY () Delete
Name: WESTERGOM, ANDREA
Address: 1515 S FEDERAL HWY, STE 201
City-St-Zip: BOCA RATON, FL 33432

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:

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: MICHAEL R. WATSON

TREA

04/27/2007

Electronic Signature of Signing Officer or Director

Date