2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40114

City-St-Zip:

DAVIE. FL 33314

FILED Jan 28, 2004 Secretary of State

Entity Name: TOWN OF DAVIE ECONOMIC DEVELOPMENT COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

6591 SW 45TH ST 6591 SW ORANGE DRIVE

DAVIE, FL 33314 DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

6591 SW 45TH ST 6591 SW ORANGE DRIVE

DAVIE, FL 33314 DAVIE, FL 33314

FEI Number: 65-0269033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCKENZIE, CATHERINE
BELLSOUTH
6451 N. FEDERAL HWY, ROOM #1113
WU, MARGARET
6591 ORANGE DRIVE
DAVIE, FL 33314

FORT LAUDERDALE, FL 33308

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: MARGARET WU 01/28/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

DAVIE. FL 33314

Fittle: CD () Delete Title: CD (X) Change () Addition

 Name:
 MACKENZIE, CATHY
 Name:
 LEGG, ROBERT P MR.

 Address:
 6451 N. FEDERAL HWY, #R113
 Address:
 1800 N. DOUGLAS ROAD

 City-St-Zip:
 FT. LAUDERDALE, FL 33306
 City-St-Zip:
 PEMBROKE PINES, FL 33024

Title: VCD () Delete Title: VCD (X) Change () Addition
Name: HORACIO, LOPEZ Name: ROSENBAUM, IRVING DR.
Address: 2695 DAVIE RD Address: NSU HEALTH PROFESSIONS

 City-St-Zip:
 DAVIE, FL 33314
 City-St-Zip:
 DAVIE, FL 33314

 Title:
 STD () Delete
 Title:
 STD (X) Change () Addition

 Title:
 STD () Delete
 Title:
 STD (X) Change () Addition

 Name:
 AUCAMP, JAMES MR.

 Address:
 5300 DAVIE RD
 Address:
 5300 DAVIE ROAD

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: ROBERT P. LEGG MR. 01/28/2004