

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42390

FILED
Apr 06, 2010
Secretary of State

Entity Name: BROWARD COUNTY MUNICIPAL CLERKS ASSOCIATION, INC.

Current Principal Place of Business:

TOWN CLERK
6591 ORANGE DR
DAVIE, FL 33314 US

New Principal Place of Business:

DEPUTY CLERK
100 WEST ATLANTIC BOULEVARD
POMPANO BEACH, FL 33060 US

Current Mailing Address:

TOWN CLERK
6591 ORANGE DR
DAVIE, FL 33314 US

New Mailing Address:

DEPUTY CLERK
100 WEST ATLANTIC BOULEVARD
POMPANO BEACH, FL 33060 US

FEI Number: 65-0322465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOREN, SAMUEL S.
3099 EAST COMMERCIAL BLVD.
SUITE 200
FORT LAUDERDALE, FL 33308 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
Name: ANZALONE, MICHELE
Address: 2600 HOLLYWOOD BLVD RM 221
City-St-Zip: HOLLYWOOD, FL 33022

Title: VICE
Name: GRAHAM-JOHNSON, ADA
Address: 150 NE 2ND AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SECR
Name: MUNIZ, RUSSELL C
Address: 6591 ORANGE DR
City-St-Zip: DAVIE, FL 33314

Title: TREA
Name: HAMMOND, ASCELETA
Address: 100 WEST ATLANTIC BOULEVARD
City-St-Zip: POMPANO BEACH, FL 33060

I hereby 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 all other like empowered.

SIGNATURE: ASCELETA HAMMOND

TREA

04/06/2010

Electronic Signature of Signing Officer or Director

Date