2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42717

FILED Sep 17, 2009 Secretary of State

Entity Name: BROWARD COUNTY RIGHT TO LIFE, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
512 N.E. 2 FT. LAUDI	6TH ST. ERDALE, FL 33305 US			
Current Mailing Address:		New Maili	New Mailing Address:	
512 N.E. 2 FT. LAUDI	6TH ST. ERDALE, FL 33305 US			
In accordan	: 23-7380518	= '	()	
	HN 31ST TERRACE JDERDALE, FL 33309 US			
The above in the State	named entity submits this statement for the pule of Florida.	rpose of changing i	its registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Agen	t	Date	
OFFICER	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D () Delete AMAN, JOHN 6300 NW 31ST TERRACE FT. LAUDERDALE, FL 33309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete KASTENSMIDT, SAMUEL 2940 N. COURSE DR. #705 POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition LAURA, LACOUR 6278 DUVAL DRIVE POMPANO BEACH, FL 33063	
Title: Name: Address: City-St-Zip:	S/D () Delete SULUVAN, NITA 4011 N. CYPRESS DR., BLDG. 83 APT. 205 POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	S (X) Change () Addition MARY, MINNET 2143 NE 58TH COURT FORT LAUDERDALE,, FL 33308	
Title: Name: Address: City-St-Zip:	T/D () Delete FADGEN, JERRY 7379 SW 9TH CT PLANTATION, FL 33317	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BENDER, LAURA 6278 DUVAL DRIVE POMPANO BEACH, FL 33063	Title: Name: Address: City-St-Zip:	D (X) Change () Addition KAREN, GUSHTA 800 CYPRESS GROVE DRIVE #109 POMPANO BEACH, FL 33069	
Title: Name: Address: City-St-Zip:	D () Delete CLEARY, JAMES 650 SW 87 TERRACE PLANTATION, FL 33324	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TEWANNAH, AMAN 6300 NW 31ST TERRACE FORT LAUDERDALE, FL 33309	

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: JOHN AMAN PRES 09/17/2009