# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2004**
**Secretary of State**

DOCUMENT# N45977

**Entity Name:** LEADERSHIP BROWARD FOUNDATION, INC.

**Current Principal Place of Business:**

1415 E SUNRISE BLVD
SUITE 401
FT. LAUDERDALE, FL 33304 US

**New Principal Place of Business:**

320 NE THIRD AVENUE
SUITE 340
FT. LAUDERDALE, FL 33301 US

**Current Mailing Address:**

1415 E. SUNRISE BLVD
SUITE 401
FT. LAUDERDALE, FL 33304 US

**New Mailing Address:**

320 NE THIRD AVENUE
SUITE 340
FT. LAUDERDALE, FL 33301 US

**FEI Number: 65-0387636** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MARTIN, NICOLE
1415 E SUNRISE BLVD
SUITE 401
FT. LAUDERDALE, FL 33304 US

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

HOTTE, ANNE
320 NE THIRD AVENUE
SUITE 340
FT. LAUDERDALE, FL 33301 US

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: ANNE HOTTE 04/30/2004
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: HOTTE, ANNE
Address: 1415 E SUNRISE BLVD, STE 401
City-St-Zip: FT LAUDERDALE, FL

Title: T ( ) Delete
Name: PERELLA, TED
Address: 1000 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: D ( ) Delete
Name: PHARES, LEATRICE
Address: 2104 NE 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: LUBOMSKI, RAY
Address: 201 S. ANDREWS AVE., 2ND FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: P ( ) Delete
Name: LEONARD, KEVIN
Address: 2844 E OAKLAND PK BLVD
City-St-Zip: FORT LAUDERDALE, FL 33306

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

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: FAYSASH, GARY
Address: 1301 N FEDERAL HIGHWAY
City-St-Zip: FT LAUDERDALE, FL 33308

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 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: ANNE HOTTE- D 04/30/2004
Electronic Signature of Signing Officer or Director Date