

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90069 039 \*\*\*\*70.00

**DOCUMENT # N46713**

1. Entity Name

**BROWARD SERVICES FOR RESIDENTIAL SELECTIONS, INC.**



Principal Place of Business

3500 RIVERSIDE DRIVE  
CORAL SPRINGS FL 33065

Mailing Address

3500 RIVERSIDE DRIVE  
CORAL SPRINGS FL 33065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0393752

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

POINTING, JACQUELYN  
3500 RIVERSIDE DR.  
SUITE 1  
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE TD ☐ Delete  
NAME POINTING, JACQUELYN A.  
STREET ADDRESS 3500 RIVERSIDE DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE VD ☐ Delete  
NAME WIGAND, ROBERTA  
STREET ADDRESS 715 S.W. 14TH AVENUE  
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE TD ☒ Delete  
NAME POINTING, TERENCE  
STREET ADDRESS 3500 RIVERSIDE DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE SD ☒ Delete  
NAME HANKEN, ANDREW  
STREET ADDRESS 2075 CHAMPIONS WAY  
CITY-ST-ZIP NORTH LAUDERDALE FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TPD ☒ Change ☐ Addition  
NAME POINTING, JACQUELYN A.  
STREET ADDRESS 3500 Riverside Dr.  
CITY-ST-ZIP Coral Springs FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition  
NAME Davis, Linda  
STREET ADDRESS 3500 Riverside Dr.  
CITY-ST-ZIP Coral Springs FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jacquelyn A. Pointing PK/CEO Jacquelyn A. Pointing 02-06-06 954-344 7642