

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N48932 (0)

1. Corporation Name

BRITISH AMERICAN CHAMBER OF COMMERCE OF GREATER
FORT LAUDERDALE, INC.

Principal Place of Business

Mailing Address

2550 N FED HWY
STE 13
FT LAUDERDALE FL 33305
US

2550 N FED HWY
STE 13
FT LAUDERDAL FL 33305
US

FILED
Oct 14 1998 8:00am
Secretary of State



3. Date Incorporated or Qualified

05/14/1992

4. FEI Number

65-0371080

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a home owners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RANKIN, JANE C
1 EAST BROWARD BLVD.
STE 1600
FORT LAUDERDALE FL 33301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TO
NAME RANKIN, JANE
STREET ADDRESS 1 E. BROWARD BLVD. STE 1600
CITY-ST-ZIP FORT LAUDERDALE FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE SD
NAME SHERWIN, LINDA
STREET ADDRESS 2550 N. FEDERAL HWY STE 3
CITY-ST-ZIP FT LAUDERDALE FL

2.1 TITLE PD
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE C
NAME WORTHINGTON, ALEXANDER
STREET ADDRESS 2550 N. FEDERAL HWY STE 3
CITY-ST-ZIP FT LAUDERDALE FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD
NAME BEACH, ANNA
STREET ADDRESS 2550 NO FEDERAL HIGHWAY
CITY-ST-ZIP FORT LAUDERDALE FL

4.1 TITLE D
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME WAGNER, CHRISTOPHER
STREET ADDRESS 100 N BISCAYNE BLVD, #1315
CITY-ST-ZIP MIAMI FL

5.1 TITLE SD
5.2 NAME SHIRLEY KIRIAKO
5.3 STREET ADDRESS 2550 N FEDERAL HIGHWAY # 3
5.4 CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE PD
NAME OLDFIELD, DAVID AC
STREET ADDRESS 633 SO FEDERAL HIGHWAY
CITY-ST-ZIP FORT LAUDERDALE FL

6.1 TITLE C
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/2/98 Daytime Phone #

CR2E037 (5/98)