

FILE NOW: FILING FEE IS \$61.25

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90019 010 \*\*\*\*61.25

0050173

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N50473

1. Corporation Name ASSOCIATION OF BROWARD COUNTY MEDIATORS, INC.

Principal Place of Business 116 SE 6TH CT FT. LAUDERDALE FL 33301 Mailing Address 116 SE 6TH CT FT. LAUDERDALE FL 33301



2. Principal Place of Business, 2a. Mailing Address, 3. Date Incorporated or Qualified (08/17/1992), 4. FEI Number (65-0355827), 5. Certificate of Status Desired, 6. Election Campaign Financing

9. Name and Address of Current Registered Agent (FISCHLER, MICHAEL A.), 10. Name and Address of New Registered Agent

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.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include names like BASS, IRIS M, BASS, DANIEL B, CAPP AL, POTASH, VELLA ROSENTHA, TELL, MEAH ROTHMAN, WAXMAN, GERALDINE L.

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...

SIGNATURE: SIGNATURE REQUIRED DANIEL B. BASS 5/7/99 954-763-5778

CR2E037 (1/198)