2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # N50734 ATER FORT LAUDERDAL	E TAX COUNCIL, IN	c. (03-06	-2008 90046 025	****61.2	25	
Principal Place of Business C/O JUDY B. BONEVAC C780 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FL 33306 US Mailing Address C/O JUDY B. BONEVAC 2780 EAST OAKLAND PAR FORT LAUDERDALE, FL 33306 US FORT LAUDERDALE, FL 3								
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02152008 Chg-NP CR2E037 (12/06)				
City & State		City & State		4. FEI Number 65-0355936		<u> </u>	plied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status		8.75 Addi ee Required		
	6. Name and Address of Current	t Registered Agent		7. Name and Address	of New Registered A	gent		
DONE/AC HIDV B			Name	Name				
BONEVAC, JUDY B 2780 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FL 33306			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
			City	FL Zip Code				
8. The above the obligat	named entity submits this statement fi ions of registered agent.	or the purpose of changing its	registered office or reç	gistered agent, or both, in the	State of Florida. I am fa	amiliar with, a	and accept	
	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE	: Registered Agent signature re	equired when reinstating)	DATE			
-: ·	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008		npaign Financing	\$5.00 May Be Added to Fees	Make check Florida Depart			
10.	Filing Fee is \$61.25	9. Election Can Trust Fund C	npaign Financing	\$5.00 May Be	Make check Florida Depart	ment of St	ate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or subdemental 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 so used 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 attaching truth an address, with all other like empowered.

SIGNATURE:

Mer DIATEDA TREASUR

02/15/08 (954)375-1132