FILE NOW: FILING FEE IS $61.25

FILED
Mar 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # N92000000101 (7)

1. Corporation Name

THE GREATER FORT LAUDERDALE/BROWARD CHAPTER OF T HE NATIONAL SOCIETY OF FUND RAISING EXECUTIVES,

Principal Place of Business	Mailing Address
P.O. BOX 4278 FT LAUDERDALE FL 33338	P.O. BOX 4278 FT LAUDERDALE FL 33338

3. Date Incorporated or Qualified: 10/27/1992

4. FEI Number: 65-0133478 ☐ Applied For ☐ Not Applicable

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 homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

KEITH, BARBARA
335 S.E. 6TH AVENUE
STRANAHAN HOUSE, INC.
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PED	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JORDFALD, ELI		1.2 NAME		
STREET ADDRESS	WOMEN IN DISTRESS OF BROWARD		1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	2.1 TITLE	PEID	☐ Change ☒ Addition
NAME	CALHOUN, PEGGY		2.2 NAME	Leslie Brown	
STREET ADDRESS	2741 N.E. 57 COURT		2.3 STREET ADDRESS	201 SW Fifth Avenue	
CITY-ST-ZIP	FORT LUADERDALE FL		2. 4 CITY-ST-ZIP	Fort Lauderdale, FL 33312	
TITLE	TD	☐ DELETE	3.1 TITLE	VPID	☒ Change ☐ Addition
NAME	KEITH, BARBARA W.		3.2 NAME	BARbara Keith	
STREET ADDRESS	335 S.E. 6TH AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		3.4. CITY-ST-ZIP		
TITLE	PD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CARTER, LINDA		4. 2 NAME		
STREET ADDRESS	401 S.W. 2ND ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	5.1 TITLE	S	☐ Change ☒ Addition
NAME	DEARDEN, PAMELLA R.		5.2 NAME	Steven Siegel	
STREET ADDRESS	1229 N.E. 37TH STREET		5.3 STREET ADDRESS	1 Financial Plaza #2600	
CITY-ST-ZIP	FT LAUDERDALE FL		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33394	
TITLE	D	☐ DELETE	6.1 TITLE	VPID	☒ Change ☐ Addition
NAME	COPELAND, JANET		6.2 NAME	SANET COPLAND	
STREET ADDRESS	550 SW 12TH AVENUE		6.3 STREET ADDRESS	3012 E. Commercial Blvd.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

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: _____ STEVEN SIEGEL 3/4/98 (954) 229-3090

CR2E037 (10/97)