

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000689

FILED
May 01, 2005
Secretary of State

Entity Name: NORTH BROWARD CITIZENS ACTION GROUP INC.

Current Principal Place of Business:

4700 N.E. 1ST TERR.
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

4700 N.E. 1ST TERR.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 65-0403608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALVAREZ, EDWARD
4700 N.E. 1ST TERR.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ALVAREZ, EDWARD
Address: 4700 N.E. 1ST TERR
City-St-Zip: POMPANO BEACH, FL 33064

Title: DT () Delete
Name: POTTER, ROBERT
Address: 3701 NW 4TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: SHUMATE, JERRY
Address: 240 NE 41ST
City-St-Zip: POMPANO BEACH, FL

Title: VP () Delete
Name: ANDRUS, DEBBIE
Address: 4800 NW 4TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: ALVAREZ, GINGER
Address: 4700 NE 1ST TERR.
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD ALVAREZ

Electronic Signature of Signing Officer or Director

PRES

05/01/2005

_____ Date