

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2005 8:00 am
Secretary of State

08-17-2005 90002 048 ****70.00

DOCUMENT # N93000000797					
1. Entity Name BROWARD COUNTY CHAPTER OF THE NATIONAL ORGANIZATION FOR WOMEN, INC.					
Principal Place of Business BROWARD NOW POST OFFICE BOX 23640 FT. LAUDERDALE, FL 33307			Mailing Address BROWARD NOW POST OFFICE BOX 23640 FT. LAUDERDALE, FL 33307		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		08132005 Chg-NP CR2E037 (10/03)	
4. FEI Number 65-0452690				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WUERZBURGER, NANCY 140 NW 77TH ST PEMBROKE PINES, FL 33024			7. Name and Address of New Registered Agent		
Name			Bertha Smith		
Street Address (P.O. Box Number's Not Acceptable)			569 Banks Road		
City			Margate FL Zip Code 33063		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE			DATE 8/14/05		
Filing Fee is \$61.25 Due by September 7, 2005			9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY ST ZIP	P WUERZBURGER, NANCY 144 NW 77TH STREET PEMBROKE PINES, FL 33024	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	P Bertha Smith 569 Banks Rd Margate FL 33063	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	MD STERNER, JOANNE 2215 CYPRESS ISLAND DR., #602 POMPANO BEACH, FL 33069	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	V Sharon Roseman 4741 NE 27 AVENUE FT. LAUDERDALE FL 33308	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SD LUSHER, SUSAN 9875 NW 9TH CT. PLANTATION, FL 33324	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	T Sherry Lewis 1050 NW 24th TERRACE FT. LAUDERDALE, FL 33311	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	TD BROWN, SARAH 1364 NE 25TH CT POMPANO BEACH, FL 33064	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	S Margaret Davidson 750 PINE DR Apt. 11 Pompano Beach, FL 33060	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	V SMITH, BERTHA 569 BANKS ROAD MARGATE, FL 33063	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like employment.					
SIGNATURE:			DATE 8/14/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					