

# 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT # N93000001041**

1. Entity Name  
BROWARD COUNTY COMMUNITY DEVELOPMENT CORPORATION, INC.



FILED  
05 AUG -3 AM 10: 53

ALLAHACSEE, FLORIDA

Principal Place of Business  
305 SE 18TH COURT  
FORT LAUDERDALE, FL 33316 US

Mailing Address  
305 SE 18TH COURT  
FORT LAUDERDALE, FL 33316 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

06062005 Chg-NP CR2E037 (10/03)

4. FEI Number  
65-0407370

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENBERG, ANDREW G  
ANDREW STUART ASSET MANAGEMENT GROUP  
8751 W. BROWARD BLVD., STE. 106  
FT. LAUDERDALE, FL 33324

Name  
JOSE L. GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)  
C/O ACCELERATED CONSULTING GROUP

150 S. PINE ISLAND RD. #310

City PLANTATION FL Zip Code 33324

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Amended AR is \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD  
NAME ANASTASATPO, JANICE  
STREET ADDRESS 7145 W. OAKLAND PK. BLVD  
CITY-ST-ZIP LAUDERHILL, FL 33313 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME ANASTASATO, JANICE  
STREET ADDRESS (Please change spelling of last name only)  
CITY-ST-ZIP

TITLE CD  
NAME MACCHIA, JOHN J  
STREET ADDRESS 350 E. LAS OLAS BLVD. STE 1150  
CITY-ST-ZIP FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 200058477912  
CITY-ST-ZIP 08/11/05--01034--005 \*\*70.00

TITLE TD  
NAME MOLNAR, CAROL A  
STREET ADDRESS 1800 COROPRATE BLVD. NW SUITE 200  
CITY-ST-ZIP BOCA RATON, FL 33432 ☒ Delete

TITLE ☐ Change ☒ Addition  
NAME GONZALEZ, JOSE L.  
STREET ADDRESS 150 S. PINE ISLAND RD. #310  
CITY-ST-ZIP PLANTATION, FL 33324

TITLE D  
NAME TITLEMAN, STEPHAN R  
STREET ADDRESS 1528 YELLOWHEART WAY  
CITY-ST-ZIP HOLLYWOOD, FL 33019 ☒ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME President/CEO  
STREET ADDRESS Merolla, Nancy L.  
CITY-ST-ZIP 305 SE 18th Court  
Ft. Lauderdale, FL 33316

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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 empowered.

SIGNATURE: Nancy L. Merolla, Nancy L. Merolla 6/29/05 (954) 764-2800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #