

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004502

FILED
Mar 28, 2007
Secretary of State

Entity Name: SOUTH FLORIDA RESOURCE CONSERVATION AND DEVELOPMENT COUNCIL, INC.

Current Principal Place of Business:

15600 SW 288TH ST
SUITE 402
HOMESTEAD, FL 33033 US

New Principal Place of Business:

Current Mailing Address:

15600 SW 288TH ST
SUITE 402
HOMESTEAD, FL 33033 US

New Mailing Address:

FEI Number: 65-0531530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, MORGAN I
15600 SW 288TH ST
SUITE 402
HOMESTEAD, FL 33033 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: P () Delete
Name: CRAWLEY, PATRICIA
Address: 145600 SW 288 ST, SUITE 402
City-St-Zip: HOMESTEAD, FL 33033

Title: VP () Delete
Name: KURUTZ, STEPHEN
Address: 15600 SW 288 ST SUITE 402
City-St-Zip: HOMESTEAD, FL 33033

Title: SEC () Delete
Name: CLAYTON, SONNY
Address: 15600 SW 288 ST
City-St-Zip: HOMESTEAD, FL 33033

Title: T () Delete
Name: LEVY, MORGAN I
Address: 15600 SW 288TH ST, S-402
City-St-Zip: HOMESTEAD, FL 33033

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PATRICIA CRAWLEY

P

03/28/2007

Electronic Signature of Signing Officer or Director

Date