2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004502

FILED Jan 15, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

15600 SW 288TH ST SUITE 402

HOMESTEAD, FL 33033 US

Current Mailing Address: New Mailing Address:

15600 SW 288TH ST SUITE 402

HOMESTEAD, FL 33033 US

FEI Number: 65-0531530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVY, MORGAN I JACK, THORLEY
15600 SW 288TH ST 15600 SW 288TH ST
SUITE 402 SUITE 402

HOMESTEAD, FL 33033 US HOMESTEAD, FL 33033 US

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: JACK THORLEY 01/15/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: () Change () Addition

 Name:
 CRAWLEY, PATRICIA
 Name:

 Address:
 145600 SW 288 ST, SUITE 402
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 KURUTZ, STEPHEN
 Name:

 Address:
 15600 SW 288 ST SUITE 402
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 CLAYTON, SONNY
 Name:
 PATRICK, QUINN

 Address:
 15600 SW 288 ST
 Address:
 15600 SW 288 ST

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: T () Delete Title: T (X) Change () Addition

 Name:
 LEVY, MORGAN I
 Name:
 JACK, THORLEY I

 Address:
 15600 SW 288TH ST, S-402
 Address:
 15600 SW 288TH ST, S-402

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify 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 01/15/2008