

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004502

**FILED**  
**Apr 19, 2010**  
**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:**

JACK, THORLEY  
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  
**Name:** CRAWLEY, PATRICIA  
**Address:** 15600 SW 288 ST, SUITE 402  
**City-St-Zip:** HOMESTEAD, FL 33033

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

**Title:** SEC  
**Name:** PATRICK, QUINN  
**Address:** 15600 SW 288 ST  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** T  
**Name:** JACK, THORLEY I  
**Address:** 15600 SW 288TH ST, S-402  
**City-St-Zip:** HOMESTEAD, FL 33033

I hereby 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 all other like empowered.

**SIGNATURE:** PATRICIA CRAWLEY

P

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date