2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000000441

Entity Name: LITERACY COALITION OF BROWARD COUNTY, INC.

FILED Feb 27, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1350 E SUNRISE BLVD #118 FORT LAUDERDALE, FL 33304				1350 E SUNRISE BLVD SUITE # 107 FORT LAUDERDALE, FL 33304		
Current Mailing Address:				New Mailing Address:		
1350 E SUNRISE BLVD #118 FORT LAUDERDALE, FL 33304				1350 E SUNRISE BLVD SUITE # 107 FORT LAUDERDALE, FL 33304		
FEI Number: 65-0461453 FEI Number Applied For () FEI Number			mber Not Applicable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent: Nam					Address of No	ew Registered Agent:
GROSS, BONNIE SUN-SENTINEL 200 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301				SILVERMAN, PAUL AMERICAN EXPRESS 777 AMERICAN EXPRESSWAY FORT LAUDERDALE, FL 33337		
The above in the State		ubmits this statement for the pu	rpose o	f changing it	s registered of	fice or registered agent, or both,
SIGNATURE: PAUL SILVERMAN				02/27/2003		
	Electronic	Signature of Registered Agen	t			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PLATT, ELLEN 1 E BROWARD E	· ·		Title: Name: Address: City-St-Zip:	()	Change ()Addition
Title: Name: Address: City-St-Zip:	C () I MILANO, NICK 1 E BROWARD E FORT LAUDERD			Title: Name: Address: City-St-Zip:	()	Change ()Addition
Title: Name: Address: City-St-Zip:	GROSS, BONNIE	LAS BOULEVARD		Title: Name: Address: City-St-Zip:	TS (X) SILVERMAN, PA 777 AMERICAN FORT LAUDERD	EXPRESSWAY
Title: Name: Address: City-St-Zip:	D () I HANSEN, JANET 1409 SISTRUNK FORT LAUDERD	BLVD.		Title: Name: Address: City-St-Zip:	PIERSON, MARI 6301 NW 5TH W	
Title: Name: Address: City-St-Zip:	D () I RUBIN, DOROTH 250 JACARANDA PLANTATION, FL	\		Title: Name: Address: City-St-Zip:	D (X) MARSCEILL, WI 13450 WEST SU SUNRISE, FL 33	JNRISE BLVD.
Title: Name: Address: City-St-Zip:	D () [ALANI, MARJIE E 8358 W OAKLAN FORT LAUDERD	ID PARK BLVD.		Title: Name: Address: City-St-Zip:	D (X) ALONI, MARJIE 600 SE 3RD AVE FORT LAUDERE	E., 8TH FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NICK MILANO C 02/27/2003