

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004554

FILED  
Mar 18, 2007  
Secretary of State

Entity Name: BROWARD WOMEN'S ALLIANCE, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 1463  
FORT LAUDERDALE, FL 33302 US

**New Principal Place of Business:**

13090 SW 16 COURT  
DAVIE, FL 33325 US

**Current Mailing Address:**

POST OFFICE BOX 1463  
FORT LAUDERDALE, FL 33302 US

**New Mailing Address:**

FEI Number: 65-0522756      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

O'CONNOR, EILEEN M  
POST OFFICE BOX 1463  
FORT LAUDERDALE, FL 33302 US

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

BACKUS, LESLIE J  
13090 SW 16 COURT  
DAVIE, FL 33325 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: LESLIE J. BACKUS

03/18/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: O'CONNOR, EILEEN M  
Address: 201 SE 6TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP ( ) Delete  
Name: BACKUS, LESLIE  
Address: 13090 S.W. 16TH STREET  
City-St-Zip: DAVIE, FL 33325

Title: TREA ( ) Delete  
Name: SANJUAN, MARIA  
Address: AXA ADVISORS, ONE FINANCIAL PLAZA #1200  
City-St-Zip: FORT LAUDERDALE, FL 33317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: BACKUS, LESLIE J  
Address: 13090 SW 16 COURT  
City-St-Zip: DAVIE, FL 33325

Title: PE (X) Change ( ) Addition  
Name: SAN JUAN, MARIA  
Address: ONE FINANCIAL PLAZA, SUITE 1200  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: TREA (X) Change ( ) Addition  
Name: ROTH, LESLIE  
Address: GIRL SCOUTS 4701 NW 33 AVE  
City-St-Zip: OAKLAND PARK, FL 33309

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: LESLIE J. BACKUS

PRES

03/18/2007

Electronic Signature of Signing Officer or Director

Date