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Jun 18 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002355 (4)

1. Corporation Name

THE BROWARD CENTER FOR LIVING, INC.



Principal Place of Business

Mailing Address

24 SE 9TH ST.
FT. LAUDERDALE FL 33316

24 SE 9TH ST.
FT. LAUDERDALE FL 33316-1016

3. Date Incorporated or Qualified
05/15/1995

3a. Date of Last Report
02/01/1996

2. Principal Place of Business

2a. Mailing Address

21 605 SW 12th Ave

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1

27

City & State

City & State

23 Fort Lauderdale, FL

28

Zip

Country

Zip

Country

24 33312

25

USA

29

30

4. FEI Number
65-0580547

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DENTON, RANDALL M
24 SE 9TH ST.
FT. LAUDERDALE FL 33316

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME DENTON, RANDALL M
STREET ADDRESS 24 SE 9TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33316

1.1 TITLE P, S
1.2 NAME Peter Dokuchitz
1.3 STREET ADDRESS 741 SW 12th Ave
1.4 CITY-ST-ZIP FT. LA, FL 33312

TITLE D
NAME DUVALL, STEPHEN G
STREET ADDRESS 1515 E. BROWARD BLVD., APT. 311
CITY-ST-ZIP FT. LAUDERDALE FL 33301

2.1 TITLE G, M
2.2 NAME Randall Denton
2.3 STREET ADDRESS 24 SE 9th St
2.4 CITY-ST-ZIP FT LA, FL 33316

TITLE D
NAME COWDEN, PATRICK
STREET ADDRESS 1115 WEST LAS OLAS, #2
CITY-ST-ZIP FT. LAUDERDALE FL 33312

3.1 TITLE D
3.2 NAME George Morgan
3.3 STREET ADDRESS 1430 SW 10th St
3.4 CITY-ST-ZIP FT LA, FL 33312

TITLE D
NAME DEMPSEY, PATRICIA
STREET ADDRESS 1225 SE 2ND ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

4.1 TITLE D
4.2 NAME Maria Ramirez
4.3 STREET ADDRESS 906 SW 16th Ave
4.4 CITY-ST-ZIP Ft. Lauderdale, FL 33302

TITLE D
NAME DOKUCHITZ, PETER
STREET ADDRESS 741 SW 12TH AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33312

5.1 TITLE D
5.2 NAME Smiley Sansoni
5.3 STREET ADDRESS 830 NE 18th Ct
5.4 CITY-ST-ZIP Ft. Lauderdale, FL 33305

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D
6.2 NAME Charlotte McGinnis
6.3 STREET ADDRESS 321 Northlake Blvd
6.4 CITY-ST-ZIP North Palm Beach, FL 33408

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)