

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N95000002987 (4)

1. Corporation Name

CENTRAL BROWARD COMMUNITY COUNCIL BOARD, INC.

Principal Place of Business

200 N.W. 27TH AVE.
FT. LAUDERDALE FL 33311

Mailing Address

200 N.W. 27TH AVE.
FT. LAUDERDALE FL 33311



3. Date Incorporated or Qualified

06/22/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
TROUTMAN, TOMMY
3421 W. BROWARD BLVD.
FT. LAUDERDALE FL 33312

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
HANDERSON, VICTORIA
3820 N.W. 6TH ST.
FT. LAUDERDALE FL 33311

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
JENKINS, MARY
561 N.W. 35TH AVE.
FT. LAUDERDALE FL 33311

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
ROBERSON, JOHN
3551 N.W. 18TH CT.
FT. LAUDERDALE FL 33311

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
SOLOMON, CYNTHIA
830 S.W. 39TH AVE.
FT. LAUDERDALE FL 33312

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
BURNS, DEPUTY WILLIAM
3321 N.W. 6TH CT.
FT. LAUDERDALE FL 33311

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

MARY JENKINS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96

(954) 587-0940

Date Daytime Phone

CR2E037 (12/95)