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Jan 15 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # N95000003628 (3)**

1. Corporation Name

BROADWAY GROUP SOUTH, INC.

Principal Place of Business

**239 NW 119 WAY
CORAL SPRINGS FL 33071**

Mailing Address

**239 NW 119 WAY
CORAL SPRINGS FL 33071-8029**

3. Date Incorporated or Qualified

08/01/1995

3a. Date of Last Report

04/15/1996

4. FEI Number

65-0599881

Applied For

Not Applicable

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

**KLINE, JONATHAN K
9050 PINES BLVD
SUITE 450
PEMBROKE PINES FL 33024**

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 ☐ DELETE**DP
KNIES, SHEILA L
8600 NW 52ND PLACE
CORAL SPRINGS FL**CITY-ST-ZIP ☐ DELETE**DV
NICHOLSON, TERRELL T
3639 NW 99TH TER
SUNRISE FL 33351**CITY-ST-ZIP ☐ DELETE**DV
TURNER, BARBARA A
3541 NW 99TH TER
SUNRISE FL 33351**CITY-ST-ZIP ☐ DELETE**DT
GULA, STEVEN W
239 NW 119 WAY
CORAL SPRINGS FL 33071**CITY-ST-ZIP ☐ DELETE**DS
NEDBOR, WENDY L
3639 NW 99TH TER
SUNRISE FL 33351**CITY-ST-ZIP ☐ DELETE**DT
GULA, STEVEN W
239 NW 119 WAY
CORAL SPRINGS FL 33071**CITY-ST-ZIP ☐ DELETE1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0026013

CR2E037 (9/96)