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FILED

Mar 10 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS**DOCUMENT # N96000000727 (5)**

1. Corporation Name

**MARGATE YOUTH KHOURY LEAGUE, INC.**

Principal Place of Business

**8701 CLEARY BLVD.  
PLANTATION FL 33324**

Mailing Address

**P.O. BOX 4004  
MARGATE FL 33063**

3. Date Incorporated or Qualified

**02/12/1996**

3a. Date of Last Report

2. Principal Place of Business

**21 4601 CEDARHILL ROAD**

2a. Mailing Address

**26**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22****27**

City &amp; State

**23 COCONUT CREEK FL**

City &amp; State

**28**

Zip

**24 33066**

Country

Zip

**29**

Country

**30**

9. Name and Address of Current Registered Agent

**ALLOGIA, ANTHONY  
8701 CLEARY BLVD.  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

**EDWARD R. BERKHEIMER**

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

**4601 CEDARHILL ROAD**

83

84 City

**COCONUT CREEK****FL**

85 Zip Code

**33066**

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☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ 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**P/D****SLAUGHTER, RON****6327 S.W. 1ST ST.****MARGATE FL 33065**☐ Change ☒ Addition2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP**V/D****EDWORTHY, DALE****6720 N.W. 6TH ST.****MARGATE FL 33063**☐ Change ☒ Addition3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP**S/D****ROSENBERG, KEN****6250 N.W. 18TH ST.****MARGATE FL 33063**☐ Change ☒ Addition4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP**T/D****BERKHEIMER, EDWARD R.****4601 CEDARHILL ROAD****COCONUT CREEK FL 33066**☐ Change ☒ Addition5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP☐ Change ☐ Addition6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP☐ Change ☐ Addition

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:

**EDWARD R. BERKHEIMER****3-5-97****(954)****973-1311**

CR2E037 (9/96)