

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 05, 2004
Secretary of State**

DOCUMENT# N97000003780

Entity Name: BROWARD PARTNERSHIP FOR THE HOMELESS, INC.

Current Principal Place of Business:

920 N.W. 7 AVENUE
FT LAUDERDALE, FL 333117229 US

New Principal Place of Business:

Current Mailing Address:

920 N.W. 7 AVENUE
FT LAUDERDALE, FL 333117229 US

New Mailing Address:

FEI Number: 65-0777033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESPOSITO, FRANCES M
920 N.W. 7 AVENUE
FT LAUDERDALE, FL 333117229 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BORKSON, ELLIOT P ESQ
Address: 500 EAST BROWARD BOULEVARD, STE. 1800
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: CFO () Delete
Name: MCCALL, JOHN W
Address: 920 N.W. 7 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 333117229

Title: COO () Delete
Name: FREEDMAN, DAVID R
Address: 920 NW 7 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 333117229

Title: VCD () Delete
Name: LEONARD, KEVIN T
Address: 2844 EAST OAKLAND PARK BOULEVARD
City-St-Zip: FT LAUDERDALE, FL 33305

Title: SD () Delete
Name: SUROVEK, HELEN C
Address: 2495 EAST COMMERCIAL BOULEVARD
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: TD () Delete
Name: LUIISO, ANGELO J
Address: 2626 EAST OAKLAND PARK BOULEVARD
City-St-Zip: FT. LAUDERDALE, FL 33306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: BORKSON, ELLIOT P ESQ
Address: 1313 SOUTH ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN W. MCCALL

CFO

04/05/2004

Electronic Signature of Signing Officer or Director

Date