

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003780

FILED
Feb 02, 2012
Secretary of State

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
Name: TAYLOR, PATRICK A DR.
Address: 4725 N. FEDERAL HIGHWAY
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: VCD
Name: KEITH-LAZOWICK, DODIE
Address: 301 E. ATLANTIC BOULEVARD
City-St-Zip: POMPANO BEACH, FL 33060

Title: LOD
Name: GORDON, KENNETH A ESQ.
Address: 200 E. LAS OLAS BLVD., 19TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD
Name: STEPHAN, MICHAEL J CPA
Address: 200 S.W. 1ST AVENUE, SUITE 1100
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SD
Name: OSTRU, STACY
Address: 200 E. LAS OLAS BLVD.
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

SIGNATURE: FRANCES M. ESPOSITO

CEO

02/02/2012

Electronic Signature of Signing Officer or Director

Date