2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2009
Secretary of State

DOCUMENT# N97000005192

Entity Name: FIRST PRIORITY OF BROWARD COUNTY, INC.

Current Principal Place of Business:

5110 N FEDERAL HWY
SUITE 200
FORT LAUDERDALE, FL 333082447

New Principal Place of Business:

Current Mailing Address:

5110 N FEDERAL HWY
SUITE 200
FORT LAUDERDALE, FL 333082447

New Mailing Address:

FEI Number: 65-0780076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SANTANGELO, CARL G
3000 N FEDERAL HIGHWAY, #200
FORT LAUDERDALE, FL 33306 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:	P	( ) Delete
Name:	LANE, CHRISTOPHER	
Address:	5110 N. FEDERAL HWY. STE. 200	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	( ) Delete
Name:	WORDEN, DON	
Address:	2131 NE 33RD ST.	
City-St-Zip:	LIGHTHOUSE PT., FL 33064	
Title:	D	( ) Delete
Name:	MONTGOMERY, MARK	
Address:	5110 N. FEDERAL HWY. STE. 200	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	( ) Delete
Name:	MANSOUR, MARK	
Address:	2610 NE 40 ST	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	(X) Delete
Name:	AIRDO, JIM	
Address:	2342 NE 26TH ST.	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	D	( ) Delete
Name:	REED, RANDY	
Address:	1520 SW 20TH ST.	
City-St-Zip:	BOCA RATON, FL 33486	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRISTOPHER LANE P 05/29/2009

Electronic Signature of Signing Officer or Director — Date