## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000006664

Title:

Name: Address:

City-St-Zip:

Entity Name: KIDS VOTING BROWARD, INC

FILED Mar 06, 2008 Secretary of State

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Current P	rincipal Place of Business:	New Principal Place of Business:
600 SE THIRD AVE., EIGHTH FLOOR FT. LAUDERDALE, FL 33301		600 SE THIRD AVE., THIRTEENTH FLOOR FT. LAUDERDALE, FL 33301
Current M	lailing Address:	New Mailing Address:
	IIRD AVE., EIGHTH FLOOR ERDALE, FL 33301	4047 NW 115TH AVE CORAL SPRINGS, FL 33065
FEI Number	: 65-0806384 FEI Number Applied Fo	r ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		gent: Name and Address of New Registered Agent:
CORAL SE	115 AVENUE PRINGS, FL 33065 US named entity submits this statement	for the purpose of changing its registered office or registered agent, or both,
in the State	e of Florida.	
SIGNATU		
	Electronic Signature of Registe	ered Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	C () Delete KRISHNAIYER, LATHA 10405 NW 6 STREET CORAL SPRINGS, FL 33071	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VC () Delete SCHATZ, ELLEN 3112 NW 107 DRIVE SUNRISE, FL 33351	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S ( ) Delete WOLTER, MARGARET 393 CARRINGTON DRIVE WESTON, FL 33326	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete SMITH, CAROL S 4047 NW 115 AVENUE CORAL SPRINGS, FL 33065	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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CAROL S SMITH TREA 03/06/2008

() Delete

OSTRAU, NORMAN

450 E. LAS OLAS BLVD.

FT. LAUDERDALE, FL 33301

() Change () Addition