

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000213

FILED
Mar 30, 2010
Secretary of State

Entity Name: BROWARD COMMUNITY AND FAMILY HEALTH CENTERS, INC.

Current Principal Place of Business:

168 N. POWERLINE ROAD
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

5010 HOLLYWOOD BLVD 100B
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 59-3489664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAZIER, ROSALYN CEO
2518 N. STATE ROAD 7
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

FRAZIER, ROSALYN CEO
5010 HOLLYWOOD BLVD
100B
HOLLYWOOD, FL 33021 US

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: ROSALYN FRAZIER

03/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O
Name: PENN, AUNDRA PRES
Address: 1524 SOUTH 28TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33020

Title: MR
Name: PATRICK, THOMPSON SEC
Address: 5570 NW 61ST ST, UNIT 919
City-St-Zip: COCONUT CREEK, FL 33073

Title: O
Name: BALDWIN, LONNISE BM
Address: 1731 NW 5TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: MR
Name: AMOS, FARGURHARSON BM
Address: 11701 NW 17 CT
City-St-Zip: PLANTATION, FL 33323

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: ROSALYN FRAZIER

CEO

03/30/2010

Electronic Signature of Signing Officer or Director

Date