

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90213 044 ****61.25

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1. Entity Name
COUNCIL OF EXECUTIVE OFFICERS, INC.



Principal Place of Business
**11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

Mailing Address
**11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

60001379



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0839590

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CAWLEY, PAUL F
11805 HERON BAY BLVD.
POMPANO BEACH, FL 33076**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCD
ARNOLD, JOHN ☒ Delete
319 CLEMATIS ST STE 410
WEST PALM BEACH, FL 33401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCD
MILLER, JACK ☐ Change ☒ Addition
3300 UNIVERSITY DRIVE #803
CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
WOOD, RANDALL ☐ Delete
210 N UNIVERSITY DR, STE 212
CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MONAGHAN, ANDREW ☐ Change ☒ Addition
11555 HERON BAY BLVD
CORAL SPRINGS, FL 33076

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MILLER, JACK ☒ Delete
3300 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
SPIEGEL, Barry ☐ Change ☒ Addition
3300 UNIVERSITY DR #803
CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
NEIMARK, CORT ☒ Delete
800 CORPORATE DR #420
FORT LAUDERDALE, FL 33334

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MD
ROSSOMANO, GLORIA ☐ Delete
3111 NORTH UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #