

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003769

FILED
Jan 19, 2006
Secretary of State

Entity Name: THE BROWARD TEACHERS UNION LOCAL 1975 REAL ESTATE TITLE HOLDING CORPORATION

Current Principal Place of Business:

6000 N UNIVERSITY DRIVE
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

6000 N UNIVERSITY DRIVE
TAMARAC, FL 33321 US

New Mailing Address:

FEI Number: 65-0846452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAROTTA, ARLENE M
BROWARD TEACHERS UNION
6000 N UNIVERSITY DRIVE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

MAROTTA, ARLENE M MANAGER
BROWARD TEACHERS UNION
6000 N UNIVERSITY DRIVE
TAMARAC, FL 33321 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: ARLENE MAROTTA

01/19/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTERAMO, PATRICK A
Address: 441 SE 3RD ST, #602
City-St-Zip: DANIA, FL 33004

Title: VPD () Delete
Name: SCHULZ, BERNIE
Address: 1454 NW 105TH AVE
City-St-Zip: PLANTATION, FL 33322

Title: ST () Delete
Name: VIRGILLITO, RONNEY
Address: 2315 NW 187 AV
City-St-Zip: PEMBROKE PINES, FL 33029

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ARLENE MAROTTA

MANA

01/19/2006

Electronic Signature of Signing Officer or Director

Date