2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# N98000004113

Entity Name: PCAC, INC.

Current Principal Place of Business:

1501 NE 62ND STREET
FORT LAUDERDALE, FL 333345199

New Principal Place of Business:

Current Mailing Address:

1501 NE 62ND STREET
FORT LAUDERDALE, FL 333345199

New Mailing Address:

FEI Number: 59-0861374 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OCONNER, DANIEL P
200 E LAS OLAS BLVD SUITE 1900
BRINKLEY MCNERNEY SOLOMON & TATUM LLP
FORT LAUDERDALE, FL 33301 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:	PD	( ) Delete
Name:	COWGILL, LOURDES M DR.	
Address:	1501 NE 62ND STREET	
City-St-Zip:	FORT LAUDERDALE, FL 333345199 US	
Title:	C	( ) Delete
Name:	GILBERT, MARK MR.	
Address:	2340 NW 45 STREET	
City-St-Zip:	BOCA RATON, FL 33431 US	
Title:	T	( ) Delete
Name:	BANKS, WALTER MR.	
Address:	1567 PONCE DE LEON DRIVE	
City-St-Zip:	FORT LAUDERDALE, FL 33316 US	
Title:	T	( ) Delete
Name:	CIBENE, MICHELLE MRS.	
Address:	2608 NE 37 DRIVE	
City-St-Zip:	FORT LAUDERDALE, FL 33308 US	

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:	

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: LOURDES COWGILL PD 04/01/2009

Electronic Signature of Signing Officer or Director — Date