2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004981

HEART OF BROWARD FOUNDATION CORP.



Mar 31, 2003 8:00 am Secretary of State 03-31-2003 90215 032 ****61.25

FILED

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City & State Country	2. Principal Pl	lace of Business	3. Mailing Address	Tailing Address						
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S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent S. Chere R. WILLIAM R 833 S FEDERAL HWY, STH FLOOR FORT LAUDERDALE FL 33001 S. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the designations of registered agent. SIGNATURE SIGNATURE SIGNATURE FILE NOW: FEE IS \$61.25 S. Electon Campaign Financing Trust Fund Contribution. SSEE Address Of Poes Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 FILE NOW: FEE IS \$61.25 SIFEE ADDRESS OCTY-51-72 FORT LAUDERDALE FL 33316 TITLE MANAE SIFEET ADDRESS SIFEET ADDRESS SIFEET ADDRESS SIFEET ADDRESS SIFEET ADDRESS SIFEET ADDRESS OCTY-51-72 FORT LAUDERDALE FL 33316 TITLE MANAE TITLE TOTAL THE STATE SIFEET ADDRESS S	City & State					4. FE! Number 65-0930867				
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SCHERER, WILLIAM R 833 S FEDERAL HWY, 8TH FLOOR FORT LAUDERDALE FL 33001 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, hybed is pived and of registered agent and tree if approaches. POETE **Registered Agent agent averal registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Added to Fees Added to Fees Florida Department of State Florida Department of State Florida Department of State Chizner, Michael MD OFFICERS AND DIRECTORS IN 10 TITLE NAME CHIZNER, MICHAEL MD OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS IN		6. Name and Address of Current F	Registered Agent		7. Name	and Address of N	lew Registered	Agent		
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FORT LAUDERDALE FL 33301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, beed or printed above and title if spotcable. (NOTE Projectered Apent operator in received agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, beed or printed agent. FILE NOW: FEE IS \$61.25 S. Election Campaign Financing				Street A	Street Address (P.O. Box Number is Not Acceptable)					
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: