2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9900000066

FILED Jan 18, 2008 Secretary of State

Entity Name: WEST BROWARD RENEGADES V 728, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 10305 NW 40 COURT CORAL SPRINGS, FL 330651542 US **Current Mailing Address: New Mailing Address:** 10305 NW 40 COURT CORAL SPRINGS, FL 330651542 US FEI Number: 65-0996168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, ROBERT JONES, ROBERT B AGENT 10305 NW 40 COURT 10305 NW 40 COURT CORAL SPRINGS, FL 330651542 US CORAL SPRINGS, FL 330651542 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: ROBERT B. JONES 01/18/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LEFRANCOIS, WILLIAM R JR Name: Name: Address: 2360 SW 42 TER Address: City-St-Zip: FT LAUDERDALE, FL 33317 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: HELMAN, TED Name: Address: 10304 SUNRISE LAKES BLVD # 109 Address: City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: Title: () Delete Title: () Change () Addition JONES, ROBERT Name: Name: 10305 NW 40 COURT Address: Address: City-St-Zip: CORAL SPRINGS, FL 330651542 City-St-Zip: () Delete Title: Title: () Change () Addition Name: SMILEY, JOHN A JR. Name: Address: 2510 NW 115 AVE Address: City-St-Zip: CORAL SPRINGS, FL 33065 US 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: ROBERT B. JONES T 01/18/2008