

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000066

FILED
Feb 05, 2009
Secretary of State

Entity Name: WEST BROWARD RENEGADES V 728, INCORPORATED

Current Principal Place of Business:

10305 NW 40 COURT
CORAL SPRINGS, FL 330651542 US

New Principal Place of Business:

Current Mailing Address:

10305 NW 40 COURT
CORAL SPRINGS, FL 330651542 US

New Mailing Address:

10305 NW 40TH COURT
CORAL SPRINGS, FL 33065-154 US

FEI Number: 65-0996168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ROBERT B AGENT
10305 NW 40 COURT
CORAL SPRINGS, FL 330651542 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: P () Delete
Name: LEFRANCOIS, WILLIAM R JR
Address: 2360 SW 42 TER
City-St-Zip: FT LAUDERDALE, FL 33317 US

Title: V () Delete
Name: HELMAN, TED
Address: 10304 SUNRISE LAKES BLVD # 109
City-St-Zip: SUNRISE, FL 33322 US

Title: T () Delete
Name: JONES, ROBERT
Address: 10305 NW 40 COURT
City-St-Zip: CORAL SPRINGS, FL 330651542

Title: S () Delete
Name: SMILEY, JOHN A JR.
Address: 2510 NW 115 AVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, ROBERT B
Address: 10305 NW 40TH COURT
City-St-Zip: CORAL SPRINGS, FL 330651542 US

Title: V (X) Change () Addition
Name: LEFRANCOIS, WILLIAM R JR
Address: 2360 SW 42ND TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33317 US

Title: T (X) Change () Addition
Name: JONES, ROBERT B
Address: 10305 NW 40 COURT
City-St-Zip: CORAL SPRINGS, FL 330651542

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: ROBERT B JONES

P

02/05/2009

Electronic Signature of Signing Officer or Director

Date