

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000677

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE SHERIFF'S FOUNDATION OF BROWARD COUNTY, INC.

Current Principal Place of Business:

2601 WEST BROWARD BLVD., ROOM 3519
FORT LAUDERDALE, FL 333121308

New Principal Place of Business:

Current Mailing Address:

2601 WEST BROWARD BLVD., ROOM 3519
FORT LAUDERDALE, FL 333121308

New Mailing Address:

FEI Number: 65-0898338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KISSLAN, KIMBERLY A
2601 WEST BROWARD BLVD.
FORT LAUDERDALE, FL 33312 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: VC () Delete
Name: PERLMAN, MICHAEL
Address: 3200 SW 42ND ST.
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: C () Delete
Name: PRADO, MARTA
Address: 1926 HARRISON ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: ED () Delete
Name: SCHUSTER, RICK
Address: 2601 W. BROWARD BLVD.
City-St-Zip: FORT LAUDERDALE, FL 333121308

Title: D () Delete
Name: OTTINO, J.P. III
Address: 3015 N. OCEAN BLVD, STE 115
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S () Delete
Name: DU MONT, PATRICIA
Address: 1531 SE 13TH ST
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: T () Delete
Name: MARRINSON, RALPH
Address: 1601 NE 26TH ST
City-St-Zip: FORT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: EAL (X) Change () Addition
Name: VELEZ, NELSON
Address: 2601 W. BROWARD BLVD.
City-St-Zip: FORT LAUDERDALE, FL 333121308

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: NELSON VELEZ

EAL

04/28/2009

Electronic Signature of Signing Officer or Director

Date