2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# N99000001750

Entity Name: BOYNTON BEACH FIREFIGHTER BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

100 EAST BOYNTON BEACH BOULEVARD
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

100 EAST BOYNTON BEACH BOULEVARD
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 65-0908962 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: TAMIHI, CHRISTINA
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VD ( ) Delete
Name: GIRARDI, ROXANNE
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: SD ( ) Delete
Name: GIRARDI, AUDREY
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: TD ( ) Delete
Name: ABDUL-AZIZ, AISHAH
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GIRARDI, ROXANNE
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VD (X) Change ( ) Addition
Name: GIRARDI, AUDREY
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: SD (X) Change ( ) Addition
Name: RUDY, KAREN
Address: 100 EAST BOYNTON BEACH BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435

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: AISHAH ABDUL-AZIZ TD 04/09/2008

Electronic Signature of Signing Officer or Director — Date