## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000113215

Entity Name: BROWARD PROPERTY SERVICES, INC.

FILED Nov 07, 2005 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

1919 NE 45TH ST., SUITE 117 555 SE 6TH AVENUE FT. LAUDERDALE, FL 33308

#10F

DELRAY BEACH, FL 33483

**Current Mailing Address: New Mailing Address:** 

1919 NE 45TH ST., SUITE 117 FT. LAUDERDALE, FL 33308 555 SE 6TH AVENE

#10F

DELRAY BEACH, FL 33483

FEI Number: 90-0053559 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOYCE, GLORIA JOYCE, GLORIA 1919 NE 45TH ST., SUITE 117 555 SE 6TH AVENUE

FT. LAUDERDALE, FL 33308 US DELRAY BEACH, FL 33483 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: 11/07/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

JOYCE, GLORIA JOYCE, GLORIA Name: Name:

1919 NE 45TH ST., SUITE 117 555 SE 6TH TERRACE #10F Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33308 City-St-Zip: DELRAY BEACH, FL 33483

( ) Delete Title: Title: (X) Change ( ) Addition

Name: BROWN, SUSAN Name: BROWN, SUSAN 1919 NE 45TH ST., SUITE 117 Address: **6611 NE 20 TERRACE** Address: City-St-Zip: FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33308 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN BROWN 11/07/2005 D