2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032555

Entity Name: BROWARD REAL ESTATE COMPANY

FILED Mar 18, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
1995 E. OAKLAND PARK BLVD. SUTIE 200 FT. LAUDERDALE, FL 33306			SUITE 20	1995 E. OAKLAND PARK BLVD. SUITE 200 FT. LAUDERDALE, FL 33306		
Current M	lailing Addres	ss:	New Mail	New Mailing Address:		
1995 E. OAKLAND PARK BLVD. SUTIE 200 FT. LAUDERDALE, FL 33306			SUITE 20	1995 E. OAKLAND PARK BLVD. SUITE 200 FT. LAUDERDALE, FL 33306		
FEI Number	: 32-0067255	FEI Number Applied For ()	FEI Number Not App	olicable () Certificate	of Status Desired ()	
Name and	l Address of C	Current Registered Agent:	Name and	d Address of New Regis	tered Agent:	
1995 E. OA SUTIE 200 FT. LAUDI	ERDALE, FL 3	33306 US	1995 E. O SUITE 20 FT. LAUD	BLACKBURN, WAYNE 1995 E. OAKLAND PARK BLVD. SUITE 200 FT. LAUDERDALE, FL 33306 US		
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing	its registered office or reg	gistered agent, or both,	
SIGNATUI	RE: WAYNE	BLACKBURN		03/18/2009		
Election Co.		nic Signature of Registered Ag	ent	D	ate	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	BLACKBURN, V	ND PARK BLVD., SUITE 200	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	MATLUCK, DAY	ND PARK BLVD., SUITE 200	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	STARKEY, MIC	ND PARK BLVD.,SUITE 200	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	ALBURY, BRÌA	ND PARK BLVD., SUITE 200	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title:	0 () Delete	Title:	() Change ()	Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: WAYNE BLACKBURN D 03/18/2009

SHAFFER, KENNETH

FT. LAUDERDALE, FL 33306

1995 E. OAKLAND PARK BLVD., SUITE 200

Name:

Address:

City-St-Zip: