

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151752

FILED  
Feb 01, 2012  
Secretary of State

Entity Name: BROUGH, CHADROW & LEVINE, P.A.

**Current Principal Place of Business:**

1900 NORTH COMMERCE PKWY  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1900 NORTH COMMERCE PKWY  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 20-1846245

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINE, SCOTT J ESQ  
1900 NORTH COMMERCE PKWY  
WESTON, FL 33326 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  
Name: LEVINE, SCOTT J  
Address: 1900 NORTH COMMERCE PKWY  
City-St-Zip: WESTON, FL 33326

Title: VP  
Name: CHADROW, MICHAEL S  
Address: 1900 NORTH COMMERCE PKWY  
City-St-Zip: WESTON, FL 33326

Title: ST  
Name: BROUGH, DAVID L  
Address: 1900 NORTH COMMERCE PKWY  
City-St-Zip: WESTON, FL 33326

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL CHADROW

VP

02/01/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date