## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08426

Entity Name: BROWARD SHERIFF'S ADVISORY COUNCIL, INC.

**FILED** Jan 27, 2015 **Secretary of State** CC7379524051

## **Current Principal Place of Business:**

5300 N. FEDERAL HIGHWAY FORT LAUDERDALE. FL 33308

## **Current Mailing Address:**

P.O. BOX 350064

FORT LAUDERDALE. FL 33335 US

FEI Number: 59-2600022 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SIEGEL, MYRON E ESQ. 1920 E. HALLANDALE BEACH BOULEVARD SUITE 801 HALLANDALE BEACH, FL 33009 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: MYRON E. SIEGEL 01/27/2015

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

HALLANDALE BEACH FL 33009

Officer/Director Detail:

Address

Title **CHAIRMAN** Title **SECRETARY** 

STOTSKY, ALAN Name Name KAZARES, RICHARD Address 728 SW 4TH STREET Address 2584 LUCILLE DRIVE

FORT LAUDERDALE FL 33316 City-State-Zip: FORT LAUDERDALE FL 33312 City-State-Zip:

Title **TREASURER DIRECTOR** Title

SIEGEL, MYRON E. ESQ. Name Name WEAVER, GEORGE

Address 1920 E.HALLANDALE BEACH Address 5300 N. FEDERAL HIGHWAY. **BOULEVARD** 

SUITE 801 City-State-Zip: FORT LAUDERDALE FL 33308

Title VC

Name WINDRIDGE, KATHLEEN

City-State-Zip: FORT LAUDERDALE FL 33316

2 ISLA BAHIA TERRACE

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

01/27/2015 SIGNATURE: MYRON SIEGEL **TREASURER**