

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N08426

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

Current Principal Place of Business:

5300 N. FEDERAL HIGHWAY
FORT LAUDERDALE, FL 33308

Current Mailing Address:

1920 EAST HALLANDALE BEACH BLVD
SUITE 801
HALLANDALE BEACH, FL 33009 US

FEI Number: 59-2600022

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIEGEL, MYRON
1920 E. HALLANDALE BEACH BLVD #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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name SIEGEL, MYRON
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER
Name SIEGEL, MYRON E. ESQ.
Address 1920 E.HALLANDALE BEACH
BOULEVARD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title AS
Name CACIOPPO, DONALD
Address 12372 ANTILLE DRIVE
City-State-Zip: BOCA RATON FL 33428

Title AT
Name WEAVER, GEORGE
Address 5300 N. FEDERAL HWY.
City-State-Zip: FORT LAUDERDALE FL 33316

Title DIRECTOR
Name WEAVER, GEORGE
Address 5300 N. FEDERAL HIGHWAY.
City-State-Zip: FORT LAUDERDALE FL 33308

Title VC
Name WINDRIDGE, KATHLEEN
Address 2 ISLA BAHIA TERRACE
City-State-Zip: FORT LAUDERDALE FL 33316

Title C
Name DINUNZIO, NICK
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name ADAMS, BLAIR
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

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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.

SIGNATURE: MYRON SIEGEL

SECRETARY

07/28/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHOOSTER, DAN
Address 1920 EAST HALLANDALE BEACH BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name COLLINS, ED
Address 1920 EAST HALLANDALE BEACH BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name DUMONT, PAT
Address 1920 EAST HALLANDALE BEACH BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name FINN, ZACHARY
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name TANNER, CRAIG
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name LEVY, JAIME
Address 1920 EAST HALLANDALE BEACH
BLVD
SUITE 801
City-State-Zip: HALLANDALE BEACH FL 33009