

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000007781

Entity Name: BROWARD MOMS INCORPORATED**Current Principal Place of Business:**8664 SW 55TH ST
COOPER CITY, FL 33328**Current Mailing Address:**2511 N HIATUS RD
STE 1024
HOLLYWOOD, FL 33026 US**FEI Number: 81-3498587****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOLFE, BRITTANY
8664 SW 55TH ST
COOPER CITY, FL 33328 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	EXECUTIVE DIRECTOR
Name	WOLFE, BRITTANY
Address	8664 SW 55TH ST
City-State-Zip:	COOPER CITY FL 33328

Title	PRESIDENT
Name	WOLFE, DWAYNE
Address	8664 SW 55TH
City-State-Zip:	COOPER FL 33328

Title	VP
Name	WEST, ADORA
Address	7692 SW 5TH ST
City-State-Zip:	NORTH LAUDERDALE FL 33328

Title	DIRECTOR
Name	TAIT, TIFFANY
Address	150 SOUTH PINE ISLAND RD STE 300
City-State-Zip:	PLANTATION FL 33324

Title	DIRECTOR
Name	EUBANKS, ASHLEY
Address	4531 NW 34TH ST
City-State-Zip:	LAUDERDALE LAKES FL 33319

Title	DIRECTOR
Name	DORVIL, JAMIE
Address	PO BOX 2532
City-State-Zip:	GLENVILLE NY 12325

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: BRITTANY WOLFE**EXECUTIVE DIRECTOR****02/12/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date