

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000101

Entity Name: THE FORT LAUDERDALE/BROWARD CHAPTER OF THE ASSOCIATION OF FUNDRAISING PROFESSIONALS, INC.**FILED**
Jan 10, 2014
Secretary of State
CC7208172125**Current Principal Place of Business:**7154 N. UNIVERSITY DR
#186
TAMARAC, FL 33321**Current Mailing Address:**7154 N. UNIVERSITY DR
#186
TAMARAC, FL 33321**FEI Number: 65-0133478****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SILVERMAN, LAURA
7154 N. UNIVERSITY DR
#186
TAMARAC, FL 33321 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	TREASURER
Name	FERNANDEZ, FRANK
Address	1699 NE 3RD AVENUE #502
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	PRESIDENT ELECT
Name	KIRK, APRIL
Address	611 PONCE DE LEON DRIVE #8
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	IMMEDIATE PAST PRESIDENT
Name	KEEFE, PAUL A
Address	2208 S CYPRESS BEND DRIVE #502
City-State-Zip:	POMPANO BEACH FL 33069

Title	PRESIDENT
Name	METCALF, DIANA
Address	3617 NE 24TH AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	SECRETARY
Name	HAZEY, DEANN
Address	877 NW 61ST STREET
City-State-Zip:	FORT LAUDERDALE FL 33309

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: FRANK FERNANDEZ**TREASURER****01/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date