Title

Name

Address

City-State-Zip:

Title	3RD VP, MEMBERSHIP	Title	CORRESPONDING SECRETARY
Name	SELTZER, NANCY	Name	ROUTMAN, JONI
Address	3850 GALT OCEAN DRIVE	Address	1717 SE 9TH STREET
	#311	City-State-Zip:	FORT LAUDERDALE FL 33316
City-State-Zip:	FORT LAUDERDALE FL 33308	, ,	
	RECORDING SECRETARY	Title	TREASURER
Title		Name	AMDUR, REBA
Name	NESBIT, SUE	Address City-State-Zip:	
Address	5511 NE 31ST AVENUE		2201 SW 117TH TERRACE
Address	Soft NE STOT AVENUE		DAVIE FL 33325
City-State-Zip:	FORT LAUDERDALE FL 33308		

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: REBA AMDUR

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0900002357

Entity Name: 1000+ CLUB TO BENEFIT CANCER, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

6278 NORTH FEDERAL HIGHWAY, SUITE 150 FORT LAUDERDALE. FL 33308

Current Mailing Address:

6278 NORTH FEDERAL HIGHWAY, SUITE 150 FORT LAUDERDALE. FL 33308 US

FEI Number: 80-0364095

Name and Address of Current Registered Agent:

THOMSEN, KATHLEEN

4231 NE 19TH AVENUE

City-State-Zip: FORT LAUDERDALE FL 33308

PARLIAMENTARIAN

1840 NE 54TH STREET

FORT LAUDERDALE FL 33308

AHRENS, ANNE

OSINSKI-BURK, JULIE 9600 WEST SAMPLE ROAD #505 CORAL SPRINGS, FL 33065 US

FILED Apr 20, 2017 Secretary of State CC9006043319

Date

Certificate of Status Desired: No

2ND VP, CHARITABLE GIVING

FORT LAUDERDALE FL 33301

THOMAS, MERRILL

410 ISLE OF PALMS

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:

Title

Title Name

Address

City-State-Zip:

Name

Address

Electronic Signature of Registered Agent

Officer/Director Detail :

Ρ

TREASURER

04/20/2017

Date