

**Certification of Taxable Value**

**SECTION I**

Year: 2007  
 County: Broward  
 Principal Authority: Children's Services

FOR DOR USE ONLY	
City:	_____
TA:	_____
Levy:	_____

DR-420  
R. 06/07

Taxing Authority: Children's Services

- (1) Current Year Taxable Value of Real Property for Operating Purposes \$ 169,122,118,545 (1)
- (2) Current Year Taxable Value of Personal Property for Operating Purposes \$ 7,881,517,364 (2)
- (3) Current Year Taxable Value of Centrally Assessed Property for Operating Purposes \$ 41,717,754 (3)
- (4) Current Year Gross Taxable Value for Operating Purposes (1) + (2) + (3) = (4) \$ 177,045,353,663 (4)
- (5) Current Year Net New Taxable Value  
(New Construction + Additions + Rehabilitative Improvements Increasing Assessed Value By At Least 100% + Annexations + Total Tangible Personal Property Taxable Value In Excess of 115% of the Previous Year's Total Tangible Personal Property Taxable Value - Deletions) \$ 3,123,208,218 (5)
- (6) Current Year Adjusted Taxable Value (4) - (5) \$ 173,922,145,445 (6)
- (7) Prior Year FINAL Gross Taxable Value (From Prior Year Applicable Form DR-403 Series) \$ 158,092,003,926 (7)
- (8) Enter number of Tax Increment Value Worksheets (DR-420TIF) attached (If none, enter 0) 12

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 1 day of July, 2007 (Month, and Year)

*[Signature]*  
Signature of Property Appraiser

**SECTION II**

**TAXING AUTHORITY:** If this portion of the form is not completed in FULL your Authority will be denied TRIM certification and possibly lose its millage levy privilege for the tax year. If any line is inapplicable, enter N/A or -0-

- (9) Prior Year Operating Millage Levy \$ .4073 per \$1,000 (9)
- (10) Prior Year Ad Valorem Proceeds (7) x (9) \$ 64,390,873 (10)
- (11) Amount, if any, paid or applied in prior year as a consequence of an obligation measured by a dedicated increment value: Sum of either line (3)c or (4)a for all DR-420TIF forms \$ 2,181,079 (11)
- (12) Adjusted Prior Year Ad Valorem Proceeds (10) - (11) \$ 62,209,794 (12)
- (13) Dedicated Increment Value, if any: Sum of either line (3)b or (4)e for all DR-420TIF forms \$ 6,500,045,480 (13)
- (14) Adjusted Current Year Taxable Value (6) - (13) \$ 167,422,099,965 (14)
- (15) Current Year Rolled-Back Rate (12) divided by (14) \$ .3716 per \$1,000 (15)
- (16) Current Year Proposed Operating Millage Rate \$ .3572 per \$1,000 (16)

- (17) Check TYPE of Principal Authority (check one)
  - County
  - Independent Sp. Dist.
  - Municipality
  - Water Man. District
  - Principal Authority
  - Dep. Spec. Dist.
  - MSTU
- (18) Check Applicable Taxing Authority (check one)
- (19) Is millage levied in more than one county? (check one)
  - Yes
  - No

- (20) Current Millage Levy for Voted Debt Service \$ N/A per \$1,000 (20)
- (21) Current Millage Levy for Other Voted Millage \$ N/A per \$1,000 (21)

**DEPENDENT SPECIAL DISTRICTS AND MSTUs SKIP lines (22) through (28)**

- (22) Enter the Total Adjusted Prior Year Ad Valorem Proceeds of ALL Dependent Special Districts and MSTUs levying a millage. (The sum of Line (12) from each District's and MSTU's Form DR-420) \$ -0- (22)
- (23) Total Adjusted Prior Year Ad Valorem Proceeds: (12) + (22) \$ 62,209,794 (23)
- (24) The Current Year Aggregate Rolled-Back Rate: (23) divided by (14) \$ .3716 per \$1,000 (24)
- (25) Current Year Aggregate Rolled-Back Taxes (4) x (24) \$ 65,790,053 (25)
- (26) Enter Total of all non-voted Ad Valorem Taxes proposed to be levied by the Principal Taxing Authority, all Dependent Districts, and MSTUs if any. Sum of line (16) x line (4) from all Form DR-420s \$ 63,240,600 (26)
- (27) Current Year Proposed Aggregate Millage Rate: (26) divided by (4) \$ .3572 per \$1,000 (27)
- (28) Current Year Proposed Rate as a Percent Change of Rolled-Back Rate:  
[(Line 27 divided by Line 24) - 1.00] x 100 <3.88> % (28)

Date, Time and Place of the First Public Budget Hearing: Sept. 5, 2007 @ 5:01pm Children's Services Council  
6301 NW 5th Way Suite 3000, Ft. Lauderdale, FL 33309

I do hereby certify the millages and rates shown herein to be correct to the best of my knowledge and belief. FURTHER, I certify that all millages comply with the provisions of Section 200.185 and 200.071 or 200.081, F.S. WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year)

Cindy Queberg Seltzer President/CEO same  
 Signature and Title of Chief Administrative Officer Address of Physical Location  
6301 NW 5th Way Suite 3000 Monti Larsen  
 Mailing Address Name of Contact Person  
Ft. Lauderdale FL 33309 954-377-1685 954-377-1683  
 City State Zip Phone # Fax #

**TAX INCREMENT ADJUSTMENT WORKSHEET**

DR-420TIF  
N. 06/07

**SECTION I**

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council Community Redevelopment Area: Coral Springs CRA

(1) Tax Increment Value in Current Year ..... \$ 51,269,360 (1)  
 (2) Tax Increment Value in Previous Year ..... \$ 30,660,430 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 3 day of July, 2007 (Month, and Year).

*Roni Parvati*  
Signature of Property Appraiser

**SECTION II**

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% ..... 95 % (3)a  
 (3)b Dedicated Increment Value (3)a x (1) ..... \$ 48,705,892 (3)b  
 (3)c Amount of Payment to Redevelopment Trust Fund in Previous Year ..... \$ 14,874 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year ..... \$ \_\_\_\_\_ (4)a  
 (4)b Prior Year Operating Millage Levy Form DR-420, line (9) ..... \$ \_\_\_\_\_ per \$1000 (4)b  
 (4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 ..... \$ \_\_\_\_\_ (4)c  
 (4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c ..... % (4)d  
 (4)e Dedicated Increment Value (4)d x (1) ..... \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

*Cindy Quenberg Seltzer* President/CEO  
Signature and Title of Chief Administrative Officer

same  
Address of Physical Location

6301 NW 5<sup>th</sup> Way Suite 3000  
Mailing Address

Monti Larsen  
Name of Contact Person

Ft. Lauderdale FL 33309  
City State Zip

954-377-1685 377-1683  
Phone # Fax #

SEE INSTRUCTIONS ON REVERSE SIDE

Revised July 26, 2007  
**TAX INCREMENT ADJUSTMENT WORKSHEET**

DR-420TIF  
 N. 06/07

**SECTION I**


Year: 2007  
 County: Broward  
 Principal Authority: Children's Services Council  
 Taxing Authority: Children's Services Council

Community Redevelopment Area: Davie

(1) Tax Increment Value in Current Year \$ 376,054,801 (1)  
 (2) Tax Increment Value in Previous Year \$ 329,121,343 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
 Signature of Property Appraiser

**SECTION II**

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable.  
 Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a  
 (3)b Dedicated Increment Value (3)a x (1) \$ 357,252,061 (3)b  
 (3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 127,349 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a  
 (4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b  
 (4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c  
 (4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d  
 (4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

Cindy Oberberg Solter President/CEO  
 Signature and Title of Chief Administrative Officer

same  
 Address of Physical Location

6301 NW 5th Way Suite 3000  
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**SECTION I**

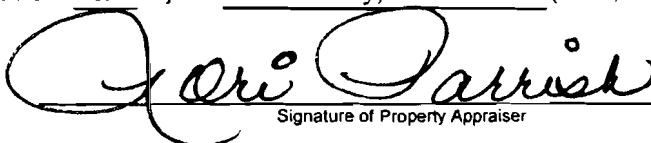
Year: 2007  
 County: Broward  
 Principal Authority: Children's Services Council  
 Taxing Authority: Children's Services Council

Community Redevelopment Area: Deerfield

(1) Tax Increment Value in Current Year \$ 311,564,950 (1)  
 (2) Tax Increment Value in Previous Year \$ 289,367,620 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
 Signature of Property Appraiser

**SECTION II**

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3a) Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3a)  
 (3b) Dedicated Increment Value (3)a x (1) \$ 295,986,703 (3b)  
 (3c) Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 108,483 (3c)

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4a) Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4a)  
 (4b) Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4b)  
 (4c) Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4c)  
 (4d) Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4d)  
 (4e) Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4e)

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

Cindy Querberg Seltzer President/CEO  
 Signature and Title of Chief Administrative Officer

same  
 Address of Physical Location

6301 NW 5<sup>th</sup> Way Suite 3000  
 Mailing Address

Monti Larsen  
 Name of Contact Person

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TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I


Year: 2007  
County: Broward  
Principal Authority: Children's Services Council  
Taxing Authority: Children's Services Council

Community Redevelopment Area: Fort Lauderdale

(1) Tax Increment Value in Current Year \$ 528,923,670 (1)  
(2) Tax Increment Value in Previous Year \$ 493,556,910 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a  
(3)b Dedicated Increment Value (3)a x (1) \$ 502,477,487 (3)b  
(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 191,014 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a  
(4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b  
(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c  
(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d  
(4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

Cindy Greenberg Seltzer, President/CEO  
Signature and Title of Chief Administrative Officer

Same  
Address of Physical Location

6301 NW 5th Way Suite 3000  
Mailing Address

Monti Larsen  
Name of Contact Person

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TAX INCREMENT ADJUSTMENT WORKSHEET

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N. 06/07

SECTION I

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Hallandale Beach

(1) Tax Increment Value in Current Year \$ 981,489,180 (1)  
(2) Tax Increment Value in Previous Year \$ 810,581,950 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

[Signature]  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a  
(3)b Dedicated Increment Value (3)a x (1) \$ 932,414,721 (3)b  
(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 313,643 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a  
(4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b  
(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c  
(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d  
(4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

Cindy Greenberg Seltzer President/CEO  
Signature and Title of Chief Administrative Officer

same  
Address of Physical Location

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TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I

Year: 2007

County: Broward

Principal Authority: Children's Services Council

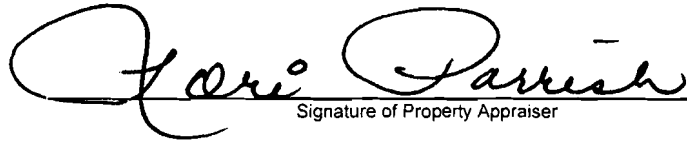
Taxing Authority: Children's Services Council

Community Redevelopment Area: Hollywood Beach

(1) Tax Increment Value in Current Year	\$	<u>1,896,088,550</u>	(1)
(2) Tax Increment Value in Previous Year	\$	<u>1,498,321,310</u>	(2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a	Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100%	<u>95</u>	% (3)a
(3)b	Dedicated Increment Value (3)a x (1)	\$ <u>1,801,284,123</u>	(3)b
(3)c	Amount of Payment to Redevelopment Trust Fund in Previous Year	\$ <u>579,753</u>	(3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a	Amount of Payment to Redevelopment Trust Fund in Previous Year	\$	(4)a
(4)b	Prior Year Operating Millage Levy Form DR-420, line (9)	\$	per \$1000 (4)b
(4)c	Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000	\$	(4)c
(4)d	Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c		% (4)d
(4)e	Dedicated Increment Value (4)d x (1)	\$	(4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

Cindy Greenberg President/CEO  
Signature and Title of Chief Administrative Officer

same  
Address of Physical Location

6301 NW 5th Way Suite 3000  
Mailing Address

Monti Larsen  
Name of Contact Person

Ft. Lauderdale FL 33309  
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954-377-1685 954-377-1683  
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TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Hollywood Downtown

(1) Tax Increment Value in Current Year	\$	<u>543,067,653</u>	(1)
(2) Tax Increment Value in Previous Year	\$	<u>480,490,873</u>	(2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

*Keri Parresh*  
Signature of Property Appraiser

SECTION II To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a

(3)b Dedicated Increment Value (3)a x (1) \$ 515,914,270 (3)b

(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 185,919 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a

(4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b

(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c

(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d

(4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July, 2007 (Month, and Year).

*Cindy Rosenberg Solfer* President/CEO  
Signature and Title of Chief Administrative Officer

6301 NW 5th Way Suite 3000  
Mailing Address

Ft. Lauderdale FL 33309  
City State Zip

same  
Address of Physical Location

Monti Larsen  
Name of Contact Person

954-377-1685 377-1683  
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TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Lauderdale Lakes

(1) Tax Increment Value in Current Year	\$	<u>137,139,370</u>	(1)
(2) Tax Increment Value in Previous Year	\$	<u>110,880,810</u>	(2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a

(3)b Dedicated Increment Value (3)a x (1) \$ 130,282,402 (3)b

(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 42,904 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a

(4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b

(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c

(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d

(4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

Cindy Queenberg Selzer President/CEO  
Signature and Title of Chief Administrative Officer

same  
Address of Physical Location

6301 NW 5th Way Suite 3000  
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Monti Larsen  
Name of Contact Person

Ft. Lauderdale FL 33309  
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Phone # Fax #

Revised July 26, 2007  
**TAX INCREMENT ADJUSTMENT WORKSHEET**

DR-420TIF  
N. 06/07

**SECTION I**

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Margate

(1) Tax Increment Value in Current Year	\$ <u>526,495,710</u>	(1)
(2) Tax Increment Value in Previous Year	\$ <u>390,139,820</u>	(2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

**SECTION II**

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable.  
Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3a) Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100%	<u>95</u> % (3a)
(3b) Dedicated Increment Value (3)a x (1)	\$ <u>500,170,925</u> (3)b
(3c) Amount of Payment to Redevelopment Trust Fund in Previous Year	\$ <u>150,428</u> (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4a) Amount of Payment to Redevelopment Trust Fund in Previous Year	\$ _____ (4)a
(4b) Prior Year Operating Millage Levy Form DR-420, line (9)	\$ _____ per \$1000 (4)b
(4c) Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000	\$ _____ (4)c
(4d) Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c	_____ % (4)d
(4e) Dedicated Increment Value (4)d x (1)	\$ _____ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

Cindy Overly Seltzer President/CEO  
Signature and Title of Chief Administrative Officer

same  
Address of Physical Location

6301 NW 5th way Suite 300  
Mailing Address

Monti Larsen  
Name of Contact Person

Ft. Lauderdale FL 33309  
City State Zip

954-377-1685 377-1683  
Phone # Fax #

SEE INSTRUCTIONS ON REVERSE SIDE

Revised July 3, 2007  
**TAX INCREMENT ADJUSTMENT WORKSHEET**

DR-420TIF  
 N. 06/07

**SECTION I**

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Plantation

(1) Tax Increment Value in Current Year ..... \$ 99,302,970 (1)  
 (2) Tax Increment Value in Previous Year ..... \$ 76,683,180 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

*Gore Parrish*  
 Signature of Property Appraiser

**SECTION II**

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable.  
 Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% ..... 95 % (3)a  
 (3)b Dedicated Increment Value (3)a x (1) ..... \$ 94,337,822 (3)b  
 (3)c Amount of Payment to Redevelopment Trust Fund in Previous Year ..... \$ 29,671 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year ..... \$ ..... (4)a  
 (4)b Prior Year Operating Millage Levy Form DR-420, line (9) ..... \$ ..... per \$1000 (4)b  
 (4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 ..... \$ ..... (4)c  
 (4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c ..... % (4)d  
 (4)e Dedicated Increment Value (4)d x (1) ..... \$ ..... (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

*Cindy Quenley Selten* President/CEO  
 Signature and Title of Chief Administrative Officer

same  
 Address of Physical Location

6301 NW 5<sup>th</sup> Way Suite 3000  
 Mailing Address

Monti Larsen  
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SEE INSTRUCTIONS ON REVERSE SIDE

TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I

Year: 2007

County: Broward

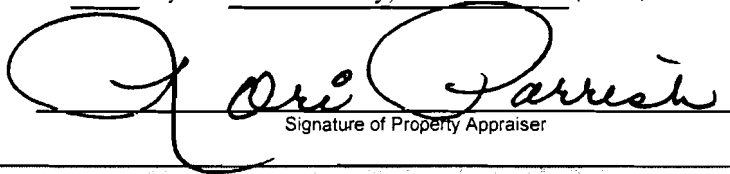
Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council Community Redevelopment Area: Pompano Beach West

(1) Tax Increment Value in Current Year \$ 775,452,969 (1)  
(2) Tax Increment Value in Previous Year \$ 613,188,889 (2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100% 95 % (3)a  
(3)b Dedicated Increment Value (3)a x (1) \$ 736,680,321 (3)b  
(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year \$ 237,264 (3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year \$ \_\_\_\_\_ (4)a  
(4)b Prior Year Operating Millage Levy Form DR-420, line (9) \$ \_\_\_\_\_ per \$1000 (4)b  
(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000 \$ \_\_\_\_\_ (4)c  
(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c \_\_\_\_\_ % (4)d  
(4)e Dedicated Increment Value (4)d x (1) \$ \_\_\_\_\_ (4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

  
Signature and Title of Chief Administrative Officer

same  
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TAX INCREMENT ADJUSTMENT WORKSHEET

DR-420TIF  
N. 06/07

SECTION I

Year: 2007

County: Broward

Principal Authority: Children's Services Council

Taxing Authority: Children's Services Council

Community Redevelopment Area: Progresso

(1) Tax Increment Value in Current Year	\$	<u>615,303,950</u>	(1)
(2) Tax Increment Value in Previous Year	\$	<u>516,409,860</u>	(2)

I do hereby certify the values shown herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at

Fort Lauderdale, Florida, this the 1st day of July, 2007 (Month, and Year).

  
Signature of Property Appraiser

SECTION II

To be completed by taxing authority. Please complete either line (3) or line (4) as applicable. Do NOT complete both.

(3) If the amount to be paid to the redevelopment trust fund IS BASED on a specific proportion of the "tax increment value":

(3)a Enter the proportion on which the payment is based. If the payment is equal to the full millage times the increment value, enter 100%		<u>95</u>	% (3)a
(3)b Dedicated Increment Value (3)a x (1)	\$	<u>584,538,753</u>	(3)b
(3)c Amount of Payment to Redevelopment Trust Fund in Previous Year	\$	<u>199,777</u>	(3)c

(4) If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the "tax increment value":

(4)a Amount of Payment to Redevelopment Trust Fund in Previous Year	\$		(4)a
(4)b Prior Year Operating Millage Levy Form DR-420, line (9)	\$		per \$1000 (4)b
(4)c Taxes Levied on Previous Year Tax Increment Value (2) x (4)b divided by 1000	\$		(4)c
(4)d Previous Year Payment as Proportion of Taxes Levied on Increment Value (4)a divided by (4)c			% (4)d
(4)e Dedicated Increment Value (4)d x (1)	\$		(4)e

I do hereby certify the calculations, millages and rates shown herein to be correct to the best of my knowledge and belief, WITNESS my hand and official signature at Ft. Lauderdale, Florida, this the 27 day of July 2007 (Month, and Year).

Cindy Menberg Selzer President/CEO  
Signature and Title of Chief Administrative Officer

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