

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Broward County School Board

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%)

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%)

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Broward County, Florida, this the 11th day of October, 2007

Signature of Chief Administrative Officer and Title Superintendent 600 SE Third Ave. Mailing Address Fort Lauderdale, FL 33301 754-321-2600 754-321-2701 City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Broward County Commission (Name of Taxing Authority)

Form with checkboxes for County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., and Municipal Service Taxing Unit (MSTU).

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value.

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Signature of Property Appraiser/Date of Certification: 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P.m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, and sub-rows A-E for various taxing authorities and districts.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title: Amanda Brungauer, Administrator. Mailing Address: 115 S. Andrews Avenue, Room 404. Phone #: 954-357-6354, Fax #: 954-357-6364. City: Ft. Lauderdale, FL, Zip: 33301

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Municipal Services
(Name of Taxing Authority)

| | | |
|---------------------------------|--|--|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input checked="" type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|----------------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | <u>1,122,113,367</u> |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | <u>1,111,369,446</u> |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | <u>-0.96 %</u> |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. *[Signature]* 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------------------|----|-----------------------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u> </u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | <u> </u> | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u> </u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | <u> </u> | per \$1,000 |
| B. Dependent Special District* | | \$ | <u> </u> | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | <u>Municipal Services</u> Name | \$ | <u>2.3353</u> | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | <u> </u> | per \$1,000 |
| | Discretionary | \$ | <u> </u> | per \$1,000 |
| | Capital Outlay | \$ | <u> </u> | per \$1,000 |
| | Additional | \$ | <u> </u> | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | <u> </u> | per \$1,000 |
| | Basin | \$ | <u> </u> | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|------------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|------------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 20 07

[Signature] Administrator 115 S. Andrews Avenue, Room 404
Signature of Chief Administrative Office and Title Mailing Address
Ft. Lauderdale FL 33301 954-357-6354 954-357-6364
City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

County Fire Rescue
(Name of Taxing Authority)

| | | |
|---------------------------------|--|--|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input checked="" type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,122,113,367 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,111,369,446 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.96 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature, at Fort Lauderdale, Florida, 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|----------------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | <u>Fire Rescue</u> Name | \$ | <u>2.5224</u> | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|------------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|------------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007
Amada Brangan Administrator 115 S. Andrews Avenue, Room 404
 Signature of Chief Administrative Officer and Title Mailing Address
Ft. Lauderdale FL 33301 954-357-6354 954-357-6364
 City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

County Street Lighting
(Name of Taxing Authority)

| | | |
|---------------------------------|--|--|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input checked="" type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 477,664,750 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 480,670,930 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.63 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. *Jore Parresh* 10/9/07
Signature of Property Appraiser/Date of Certification

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1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|--------------------------------|----|--------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | <u>Street Lighting</u> Name | \$ | <u>.3743</u> | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

| | |
|---|---------------|
| Complete Lines 6 through 9 only if the millage is to be administratively adjusted. | |
| COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S. | |
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ <u>N/A</u> |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ <u>N/A</u> |
| *MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S. | |
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ <u>N/A</u> |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ <u>N/A</u> |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

Patricia Bragg Administrator 115 S. Andrews Avenue, Room 404
Signature of Chief Administrative Officer and Title Mailing Address
Ft. Lauderdale FL 33301 954-357-6354 954-357-6364
City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

DR-422 R. 01/03

SECTION I

Pursuant to s. 200.065 (1),(5), F.S.

2007 Year

To Water Management District 3

(Name of Taxing Authority)

County Municipality Multi-County/Water Management

School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

- (1) Current Year Gross Taxable Value (From Line 4, Form DR-420) \$ 1,934,236,536
(2) Final Current Year Gross Taxable Value (From applicable Form DR-403 Series) \$ 1,900,432,716
(3) Percentage of Change in Taxable Value [(Line 2 divided by Line 1) - 1] X 100 -1.75 %

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Signature of Property Appraiser/Date of Certification

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1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

- (4) VOTED DEBT Service Millage \$ per \$1,000
(4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) \$ per \$1,000
(5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance)
A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) \$ per \$1,000
B. Dependent Special District* Water Control 3 \$.1676 per \$1,000
C. Municipal Service Taxing Unit (MSTU)* \$ per \$1,000
D. SCHOOL DISTRICT: Required Local Effort \$ per \$1,000
Discretionary \$ per \$1,000
Capital Outlay \$ per \$1,000
Additional \$ per \$1,000
E. WATER MANAGEMENT DISTRICT: DISTRICT LEVY \$ per \$1,000
Basin \$ per \$1,000

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

- (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) \$ N/A
(7) Adjusted Millage Rate (Only If Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 \$ N/A

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

- (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) \$
(9) Adjusted Millage Rate (Only If Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 \$

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title Administrator

115 S. Andrews Avenue, Room 404 Mailing Address

Ft. Lauderdale FL 33301 City State Zip

954-357-6354 954-357-6364 Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Water Management District 2 (Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. [X] Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD (County)

Table with 3 columns: Description, Reference, Value. (1) Current Year Gross Taxable Value (From Line 4, Form DR-420) \$ 4,112,101,922

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 3 columns: Description, Value, Unit. (4) VOTED DEBT Service Millage \$ per \$1,000 (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) A. PRINCIPAL TAXING AUTHORITY \$ per \$1,000 B. Dependent Special District* Water Control 2 \$.1231 per \$1,000

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 3 columns: Description, Value, Unit. (6) Unadjusted Gross Ad Valorem Proceeds \$ N/A (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). \$ N/A

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 3 columns: Description, Value, Unit. (8) Unadjusted Gross Ad Valorem Proceeds \$ N/A (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). \$ N/A

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007. [Signature] County Administrator 115 S. Andrews Avenue, Room 404 Mailing Address Ft. Lauderdale FL 33301 954-357-6354 954-357-6364 City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Water Management District 4A
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 532,343,067 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 523,458,377 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -1.67 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Jore Daresse 10/9/07
Signature of Property Appraiser/Date of Certification

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1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|---------------------------------|----|-------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | _____ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | _____ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | _____ | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | _____ | per \$1,000 |
| B. Dependent Special District* | <u>Water Control 4A</u> Name | \$ | .0149 | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | _____ Name | \$ | _____ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | _____ | per \$1,000 |
| | Discretionary | \$ | _____ | per \$1,000 |
| | Capital Outlay | \$ | _____ | per \$1,000 |
| | Additional | \$ | _____ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | _____ | per \$1,000 |
| | Basin | \$ | _____ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

Amela Braganca
Signature of Chief Administrative Officer and Title Administrator

115 S. Andrews Ave, Room 404
Mailing Address

Ft. Lauderdale FL 33301
City State Zip

954-357-6354 954-357-6364
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Water Management District 4B

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. [X] Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

- (1) Current Year Gross Taxable Value (From Line 4, Form DR-420) \$ 1,010,980,548
(2) Final Current Year Gross Taxable Value (From applicable Form DR-403 Series) \$ 1,008,583,228
(3) Percentage of Change in Taxable Value [(Line 2 divided by Line 1) - 1] X 100 -0.24 %

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

- (4) VOTED DEBT Service Millage \$ per \$1,000
(4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) \$ per \$1,000
(5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance)
A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) \$ per \$1,000
B. Dependent Special District* Water Control 4B \$.0318 per \$1,000
C. Municipal Service Taxing Unit (MSTU)* \$ per \$1,000
D. SCHOOL DISTRICT: Required Local Effort \$ per \$1,000
Discretionary \$ per \$1,000
Capital Outlay \$ per \$1,000
Additional \$ per \$1,000
E. WATER MANAGEMENT DISTRICT: DISTRICT LEVY \$ per \$1,000
Basin \$ per \$1,000

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

- (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) \$ N/A
(7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 \$ N/A

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

- (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) \$ N/A
(9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 \$ N/A

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title Administrator Mailing Address 115 S. Andrews Avenue, Room 404 Ft. Lauderdale FL 33301 954-357-6354 954-357-6364 City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Water Management District 4C
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,950,924,506 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,944,596,576 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.32 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-------------------------|----|-------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | <u>Water Control 4C</u> | \$ | .1276 | per \$1,000 |
| | Name | | | |
| C. Municipal Service Taxing Unit (MSTU)* | | \$ | | per \$1,000 |
| | Name | | | |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

[Signature]
Signature of Chief Administrative Officer and Title Administrator Mailing Address 115 S. Andrews Avenue, Room 404

Ft. Lauderdale FL 33301 954-357-6354 954-357-6364
City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Water Management District 4D

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | |
|--|--|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ 353,293,750 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ 353,880,020 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | 0.17 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature] 10/19/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | |
|--|-----------------------|----------------------|
| (4) VOTED DEBT Service Millage | | \$ per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ per \$1,000 |
| B. Dependent Special District* <u>Water Control 4D</u> | Name | \$.3241 per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ per \$1,000 |
| | Discretionary | \$ per \$1,000 |
| | Capital Outlay | \$ per \$1,000 |
| | Additional | \$ per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ per \$1,000 |
| | Basin | \$ per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | |
|--|--------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | |
|--|--------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10th day of October, 2007

[Signature] Administrator 115 S. Andrews Ave, Room 404
Signature of Chief Administrative Officer and Title Mailing Address
Ft. Lauderdale FL 33301
City State Zip 954-357-6354 954-357-6364
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Cocomar

(Name of Taxing Authority)

| | | | |
|---------------------------------|--|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management | |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 3,892,393,850 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 3,888,760,480 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.09 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | <u>Cocomar</u> | \$ | <u>.1446</u> | per \$1,000 |
| | Name | | | |
| C. Municipal Service Taxing Unit (MSTU)* | | \$ | | per \$1,000 |
| | Name | | | |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this 10th day of October, 2007

[Signature] County
Signature of Chief Administrative Officer and Title Administrator
Mailing Address
115 S. Andrews Avenue, Rm 404
954-357-6354 954-357-6364
Phone # Fax #
City State Zip Ft. Lauderdale, FL 33301

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To Central Broward Water Control District
(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|----------------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | <u>7,321,958,600</u> |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | <u>7,395,091,580</u> |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | <u>1.00 %</u> |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|-------------------------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>0</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | <u>0</u> | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>0.4700</u> <i>attached</i> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | <u>0</u> | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | <u>0</u> | per \$1,000 |
| | Basin | \$ | <u>0</u> | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at HOLLYWOOD, Florida, this 12th day of OCTOBER, 2007

[Signature]
Signature of Chief Administrative Officer and Title
Hollywood FL 33305
City State Zip

8020 Stirling Road
Mailing Address
954-432-5110 954-432-8603
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Central Broward Water Control District

(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

- (1) Current Year Gross Taxable Value (From Line 4, Form DR-420) \$ 7,321,958,600
- (2) Final Current Year Gross Taxable Value (From applicable Form DR-403 Series) \$ 7,395,091,580
- (3) Percentage of Change in Taxable Value [(Line 2 divided by Line 1) - 1] X 100 1.00 %

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P. m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

- (4) VOTED DEBT Service Millage \$ 0 per \$1,000
- (4a) OTHER VOTED Millage \$ 0 per \$1,000
(In Excess of the Millage Cap and not to Exceed Two Years)
- (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance)
 - A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) \$ 0.47% per \$1,000
 - B. Dependent Special District* \$ per \$1,000
 - C. Municipal Service Taxing Unit (MSTU)* \$ per \$1,000
 - D. SCHOOL DISTRICT:
 - Required Local Effort \$ per \$1,000
 - Discretionary \$ per \$1,000
 - Capital Outlay \$ per \$1,000
 - Additional \$ 0 per \$1,000
 - E. WATER MANAGEMENT DISTRICT:
 - DISTRICT LEVY \$ 0 per \$1,000
 - Basin \$ 0 per \$1,000

0.47
10/12/07
CR

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

- (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) \$
- (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 \$

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

- (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) \$
- (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 \$

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at HOLLYWOOD, Florida, this the 12th day of OCTOBER, 2007

[Signature]
Signature of Chief Administrative Officer and Title
Hollywood FL 33305
City State Zip
Mailing Address: 8020 Stirling Road
954-432-5110
Phone #
954-432-8603
Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Children's Services

(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|-----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 177,045,353,663 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 176,599,058,974 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.25 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature]
Signature of Property Appraiser/Date of Certification 10/1/07

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | _____ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | _____ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | .3572 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | _____ | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | _____ | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | _____ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | _____ | per \$1,000 |
| | Discretionary | \$ | _____ | per \$1,000 |
| | Capital Outlay | \$ | _____ | per \$1,000 |
| | Additional | \$ | _____ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | _____ | per \$1,000 |
| | Basin | \$ | _____ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | _____ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Ft. Lauderdale, Florida, this the 10 day of October, 2007

Cindy Muenberg Seltey / President / CEO
Signature of Chief Administrative Officer and Title

6301 NW 5th Way Suite 3000
Mailing Address

Ft. Lauderdale FL 33309
City State Zip

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

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Coconut Creek
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 3,807,086,759 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 3,807,233,402 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.00 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|----------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>—</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | <u>—</u> | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | <u>—</u> | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at City of Coconut Creek, Florida, this 11 day of October, 2007

[Signature]
Signature of Chief Administrative Officer and Title
Coconut Creek FL 33063
City State Zip

4800 W. Copans Rd
Mailing Address
954-973-6730 954-973-6754
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Cooper City (Name of Taxing Authority)

County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) with sub-rows A, B, C, D, E.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Cooper City, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title: Jose Bernabe, Asst. City Mgr. P.O. Box 290910

Cooper City, FL 33329-0910

Mailing Address: 954-434-4300

Fax #: 954-434-5099

City

State

Zip

Phone #

Fax #

See Instructions on Reverse Side

ORIGINAL

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Coral Springs

(Name of Taxing Authority)

County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, A. PRINCIPAL TAXING AUTHORITY, B. Dependent Special District, C. Municipal Service Taxing Unit (MSTU), D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Coral Springs, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title: Michael S. Levinson, City Manager; 9551 West Sample Road, Coral Springs, Florida 33065

Mailing Address: (954) 344-1088; (954) 344-1198

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Dania Beach

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 3,351,883,504 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 3,309,466,820 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -1.27 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature] 10/19/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|-----------------------|-----------|-------------|
| (4) VOTED DEBT Service Millage | | \$ 0.1316 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ 5.4044 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | per \$1,000 |
| | Discretionary | \$ | per \$1,000 |
| | Capital Outlay | \$ | per \$1,000 |
| | Additional | \$ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | per \$1,000 |
| | Basin | \$ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | |
|--|----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | |
|--|----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Dania Beach, Florida, this the 11 day of October, 2007

[Signature]
City Manager
Dania Beach, FL 33004
City State Zip

100 W Dania Beach Blvd.,
Mailing Address
(954) 924-3620
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

DR-422
R. 01/03

SECTION I

Pursuant to s. 200.065 (1),(5), F.S.

2007 Year To Davie (Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 8,465,119,259 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 8,497,683,287 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.38 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007
FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | .6945 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 4.1215 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.
COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Davie, Florida, this the 10th day of October, 20 07

| | | |
|---|-----------------------|---|
| <u>[Signature]</u> Signature of Chief Administrative Officer and Title | Town Administrator | Town of Davie, 6591 Orange Drive, Davie, FL 33314 |
| <u>Davie</u> | <u>FL</u> | <u>33314</u> |
| City | State | Zip |
| | <u>(954) 797-1050</u> | <u>(954) 797-1049</u> |
| | Phone # | Fax # |

See Instructions on Reverse Side

Certification of Final Taxable Value

DR-422
R. 01/03

SECTION I

2007 Year

To

Florida Inland Navigation District
(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 177,045,353,663 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 176,599,058,974 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.25 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | _____ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | _____ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>.0345</u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | _____ | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | _____ | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | _____ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | _____ | per \$1,000 |
| | Discretionary | \$ | _____ | per \$1,000 |
| | Capital Outlay | \$ | _____ | per \$1,000 |
| | Additional | \$ | _____ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | _____ | per \$1,000 |
| | Basin | \$ | _____ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | _____ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10 day of October, 2007

[Signature] Exec Director
Signature of Chief Administrative Officer and Title

[Signature]
Mailing Address

Fort Lauderdale FL 33477
City State Zip

561-627-3356 561-627-6480
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Fort Lauderdale DDA

(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,399,285,118 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,411,664,175 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.88 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature]
Signature of Property Appraiser/Date of Certification 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------------|----|-------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | .4800 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Fort Lauderdale DDA Name | \$ | .4933 | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10 day of October, 2007

[Signature] Executive Director
 Signature of Chief Administrative Officer and Title Mailing Address 305 South Andrews Ave #301, Ft. Lauderdale, FL 33301
 Fort Lauderdale Florida 33301 954-463-6574 954-463-8412
 City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Fort Lauderdale

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 31,373,067,889 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 31,321,529,825 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.16 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | 0.1289 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 4.1193 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10 day of October, 2007

[Signature] City Manager
Signature of Chief Administrative Officer and Title

100 N. Andrews Avenue
Mailing Address

Fort Lauderdale, FL 33301
City State Zip

(954) 828-5425 (954) 828-6674
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Sunrise Key

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification: [Signature] 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 4 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) with sub-rows A, B, C, D, E.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, this the 10 day of October, 2007

Signature of Chief Administrative Officer and Title: [Signature] City Manager, Fort Lauderdale, FL 33301

Mailing Address: 100 N. Andrews Avenue, (954) 828-5425, (954) 828-6674

City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Hallandale Beach

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, (C) Municipal Service Taxing Unit (MSTU)*, (D) SCHOOL DISTRICT, (E) WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted. COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Hallandale Beach, Florida, this the 10 day of October, 2007

Signature of Chief Administrative Officer and Title: Hallandale Bch. FL 33009

Mailing Address: 400 S. Federal Hwy, Phone #: 954-457-1300, Fax #: 954-457-1343

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Golden Isles Safe Neighborhood
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 231,756,460 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 231,245,450 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.22 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | _____ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | _____ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | _____ | per \$1,000 |
| B. Dependent Special District* <u>Golden Isles Safe Neighborhood</u> | Name | \$ | <u>1.0934</u> | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* _____ | Name | \$ | _____ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | _____ | per \$1,000 |
| | Discretionary | \$ | _____ | per \$1,000 |
| | Capital Outlay | \$ | _____ | per \$1,000 |
| | Additional | \$ | _____ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | _____ | per \$1,000 |
| | Basin | \$ | _____ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | _____ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Hattandale Beach, Florida, this the 10 day of October, 2007

[Signature] City Manager
Signature of Chief Administrative Officer and Title
Hattandale Bch, FL 33009
City State Zip

400 S. Federal Hwy.
Mailing Address
954-457-1300 954-457-1343
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To Three Islands Safe Neighborhood District
(Name of Taxing Authority)

| | | | |
|---------------------------------|--|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management | |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|--------------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | <u>731,959,320</u> |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | <u>733,960,740</u> |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | <u>0.27 %</u> |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/19/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|--|----|--------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | <u>Three Islands Safe Neighborhood</u> Name | \$ | <u>.6897</u> | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Hallandale Beach, Florida, this the 10 day of October, 2007

[Signature] City Manager
Signature of Chief Administrative Officer and Title

400 S. Federal Hwy.
Mailing Address

Hallandale Bch, FL 33009
City State Zip

954-457-1300 954-457-1343
Phone # Fax #

See Instructions on Reverse Side

BROWARD COUNTY
PROPERTY APPRAISER
RECEIVED R. 01/03

Certification of Final Taxable Value
Pursuant to s. 200.065 (1),(5), F.S.

SECTION I

2007 Year

To Hillsboro Beach
(Name of Taxing Authority)

County Municipality Multi-County/Water Management
 School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

2007 OCT 15 PM 12:03
BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,186,513,767 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,181,587,017 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.42 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.
Signature of Property Appraiser/Date of Certification: *[Signature]* 10/19/07

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | - | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | - | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 2.1938 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | - | per \$1,000 |
| B. Dependent Special District* | Name | \$ | - | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | - | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | - | per \$1,000 |
| | Discretionary | \$ | - | per \$1,000 |
| | Capital Outlay | \$ | - | per \$1,000 |
| | Additional | \$ | - | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | - | per \$1,000 |
| | Basin | \$ | - | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Hillsboro Beach, Florida, this the 11th day of October, 2007.
Signature of Chief Administrative Officer and Title: *Matthew Lippman Town Clerk*
Mailing Address: 1210 Hillsboro Mile
City: Hillsboro Beach FL 33062 State: Zip: 33062 Phone #: 954-427-4611 Fax #: 954-427-4334

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Hillsboro Inlet

(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 16,654,822,427 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 16,601,787,597 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.32 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

John Holland
Signature of Property Appraiser/Date of Certification 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|-----------------------|----|--------------------|
| (4) VOTED DEBT Service Millage | | \$ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 0.0860 per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | per \$1,000 |
| B. Dependent Special District* | Name | \$ | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | per \$1,000 |
| | Discretionary | \$ | per \$1,000 |
| | Capital Outlay | \$ | per \$1,000 |
| | Additional | \$ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | per \$1,000 |
| | Basin | \$ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | |
|---|----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | |
|---|----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Lighthouse Point, Florida, this the 15 day of October, 2007

John Holland
Signature of Chief Administrative Officer and Title
John Holland, Chairman
Fort Lauderdale, FL 33308
City State Zip

3099 E. Commercial Blvd, #200
Mailing Address
954-771-4500 954-771-4923
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Hollywood

(Name of Taxing Authority)

County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) with sub-rows A, B, C, D, E.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted. COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at City of Hollywood, Florida, this the 11 day of October, 2007

Signature of Chief Administrative Officer and Title: Hollywood, FL 33022

P.O. Box 229045, Mailing Address, (954) 921-3206, (954) 921-3343, Phone #, Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Lauderdale By The Sea
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 2,332,415,928 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 2,322,089,902 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.44 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

[Signature] 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | 0.000 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 4.1012 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at LAUDERDALE BY THE SEA, Florida, this the 11 day of OCTOBER, 2007

[Signature] Town Manager
Signature of Chief Administrative Officer and Title

4501 Ocean Drive
Mailing Address

Lauderdale By The Sea, FL 33308
City State Zip

954-776-0576 954-776-1857
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Lauderdale Lakes
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,353,694,434 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,341,544,355 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.90 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>.6053</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>5.4309</u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Lauderdale Lakes, Florida, this the 11th day of October, 2007

[Signature] City Manager
Signature of Chief Administrative Officer and Title

4300 NW 36th St., Lauderdale Lakes, FL
Mailing Address

Lauderdale Lakes, FL 33319
City State Zip

954-535-2713 954-535-1892
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To Lauderhill

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|----------------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | <u>3,042,557,330</u> |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | <u>3,035,752,766</u> |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | <u>-0.22 %</u> |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.  10/19/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>.7500</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | <u>0</u> | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | <u>4.7340</u> | per \$1,000 |
| B. Dependent Special District* | _____ | \$ | <u>0</u> | per \$1,000 |
| | Name | | | |
| C. Municipal Service Taxing Unit (MSTU)* | _____ | \$ | <u>0</u> | per \$1,000 |
| | Name | | | |
| D. SCHOOL DISTRICT: | | | | |
| | Required Local Effort | \$ | <u>0</u> | per \$1,000 |
| | Discretionary | \$ | <u>0</u> | per \$1,000 |
| | Capital Outlay | \$ | <u>0</u> | per \$1,000 |
| | Additional | \$ | <u>0</u> | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | | | | |
| | DISTRICT LEVY | \$ | <u>0</u> | per \$1,000 |
| | Basin | \$ | <u>0</u> | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at 3800 INVERRARY BLVD, Florida, this the 11 day of OCTOBER, 2007

Signature of Chief Administrative Officer and Title 

3800 INVERRARY BLVD #209, LAUDERHILL, FL
Mailing Address 33319

LAUDERHILL FL 33319
City State Zip

954-730-3033 954-714-3123
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To Lighthouse Point

(Name of Taxing Authority)

| | | | |
|---------------------------------|--|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management | |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 2,201,700,966 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 2,192,739,914 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.41 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | \$ | <u>0.2047</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | \$ | <u>3.0887</u> | per \$1,000 |
| B. Dependent Special District* _____ Name | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* _____ Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | | | |
| Required Local Effort | \$ | | per \$1,000 |
| Discretionary | \$ | | per \$1,000 |
| Capital Outlay | \$ | | per \$1,000 |
| Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | | | |
| DISTRICT LEVY | \$ | | per \$1,000 |
| Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only If Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Lighthouse Point, Florida, this the 11 day of OCTOBER, 2007

[Signature] CITY ADMINISTRATOR
Signature of Chief Administrative Officer and Title

LIGHTHOUSE POINT FL 33064
City State Zip

2200 NE 38 STREET
Mailing Address

954 943-6500 954 784-3446
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Margate

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 3,354,628,864 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 3,339,641,623 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.45 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | .1406 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | -0- | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 5.5591 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | 5.5591 | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | -0- | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | -0- | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | -0- | per \$1,000 |
| | Discretionary | \$ | -0- | per \$1,000 |
| | Capital Outlay | \$ | -0- | per \$1,000 |
| | Additional | \$ | -0- | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | -0- | per \$1,000 |
| | Basin | \$ | -0- | per \$1,000 |

| | |
|---|----------|
| Complete Lines 6 through 9 only if the millage is to be administratively adjusted. | |
| COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S. | |
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ _____ |
| *MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S. | |
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Margate, Florida, this 10 day of October, 2007

[Signature], City Manager
Signature of Chief Administrative Officer and Title
Margate, Florida 33063-3699
City State Zip

5790 Margate Boulevard
Mailing Address
954-972-6454 954-935-5258
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value
Pursuant to s. 200.065 (1),(5), F.S.

SECTION I

2007 Year

To

Miramar
City Authority 5 PM 12:04
(Name of Taxing Authority)

County Municipality Multi-County/Water Management
 School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 9,611,700,550 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 9,521,516,860 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.94 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Jane Parsh 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 5.2975 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Miramar, Florida, this the Eleventh day of October, 2007

Jane Parsh
Signature of Chief Administrative Officer and Title
Miramar, FL 33025
City State Zip

2300 Civic Center Place
Mailing Address
954-602-3117 954-602-3550
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Oakland Park

(Name of Taxing Authority)

County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, A. PRINCIPAL TAXING AUTHORITY, B. Dependent Special District*, C. Municipal Service Taxing Unit (MSTU)*, D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Oakland Park, Florida, this the 11th day of October, 2007

Signature of Chief Administrative Officer and Title: Assistant City Manager, Oakland Park, FL 33334

Mailing Address: 3650 NE 12 Ave, Oakland Park, FL 33334, Phone #: 954-630-4251, Fax #: 954-630-4216

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Parkland

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 3,751,454,134 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 3,753,110,590 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.04 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. Jane Patrick 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|-----------------------|----|-------------|
| (4) VOTED DEBT Service Millage | | \$ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | 3.4083 | \$ | per \$1,000 |
| B. Dependent Special District* | | \$ | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name | \$ | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | per \$1,000 |
| | Discretionary | \$ | per \$1,000 |
| | Capital Outlay | \$ | per \$1,000 |
| | Additional | \$ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | per \$1,000 |
| | Basin | \$ | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | |
|---|----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | |
|---|----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at CITY OF PARKLAND, Florida, this the 10 day of OCTOBER, 2007

Signature of Chief Administrative Officer and Title: [Signature]
 Mailing Address: 6600 UNIVERSITY DRIVE, PARKLAND, FL33067
 City: CITY OF PARKLAND, FLORIDA Zip: 33067
 Phone #: (954) 757-4124 Fax #: (954) 341-5161

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Pembroke Park (Name of Taxing Authority)

County, Municipality, Multi-County/Water Management, School, Independent Special Dist., Dependent Special Dist., Municipal Service Taxing Unit (MSTU)

BROWARD (County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, (A) PRINCIPAL TAXING AUTHORITY, (B) Dependent Special District, (C) Municipal Service Taxing Unit (MSTU), (D) SCHOOL DISTRICT, (E) WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

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

Pembroke Park, Florida, this the 12th day of October, 2007

Signature of Chief Administrative Officer and Title

Mailing Address

City, State, Zip

Phone #

Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Pembroke Pines
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 11,787,754,248 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 11,715,216,497 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.62 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | .4672 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | 0 | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 4.1725 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | 0 | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | 0 | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | 0 | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | 0 | per \$1,000 |
| | Discretionary | \$ | 0 | per \$1,000 |
| | Capital Outlay | \$ | 0 | per \$1,000 |
| | Additional | \$ | 0 | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | 0 | per \$1,000 |
| | Basin | \$ | 0 | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|-------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | _____ |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|-------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Pembroke Pines, Florida, this the 11 day of October, 20 07

[Signature] City Manager

10100 Pines Boulevard

Pembroke Pines, FL 33026

Mailing Address
954-435-6515 954-435-6524
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Plantation Gateway 7
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input checked="" type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 226,973,620 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 224,878,990 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.92 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | _____ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | _____ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | _____ | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | _____ | per \$1,000 |
| B. Dependent Special District* | <u>Plantation Gateway</u> Name | \$ | 1.3026 | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | _____ Name | \$ | _____ | per \$1,000 |
| D. SCHOOL DISTRICT: | | \$ | _____ | per \$1,000 |
| | Required Local Effort | \$ | _____ | per \$1,000 |
| | Discretionary | \$ | _____ | per \$1,000 |
| | Capital Outlay | \$ | _____ | per \$1,000 |
| | Additional | \$ | _____ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | | \$ | _____ | per \$1,000 |
| | DISTRICT LEVY | \$ | _____ | per \$1,000 |
| | Basin | \$ | _____ | per \$1,000 |

| | |
|---|----------|
| Complete Lines 6 through 9 only if the millage is to be administratively adjusted. | |
| COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S. | |
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ _____ |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ _____ |
| *MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S. | |
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ _____ |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ _____ |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Plantation, Florida, this the 12th day of October, 2007
[Signature] Mayor
Signature of Chief Administrative Officer and Title
Plantation FL 33317-1609
City State Zip
400 NW 73 Avenue, Plantation, FL 33317-1609
Mailing Address
(954) 585-2354 (954) 797-2756
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Plantation Midtown

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. [X] Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, (A-E) Districts and Efforts

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only If Line 3 is Greater than ± 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Plantation, Florida, this 12th day of October, 2007

Signature of Chief Administrative Officer and Title Mayor 400 NW 73 Avenue, Plantation, FL 33317-1609 Mailing Address (954) 585-2354 (954) 797-2756

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Pompano Beach
(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 12,846,098,765 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 12,793,405,291 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.41 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.  Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | 0.0836 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | N/A | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 3.2788 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | N/A | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | N/A | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | N/A | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | N/A | per \$1,000 |
| | Discretionary | \$ | N/A | per \$1,000 |
| | Capital Outlay | \$ | N/A | per \$1,000 |
| | Additional | \$ | N/A | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | N/A | per \$1,000 |
| | Basin | \$ | N/A | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

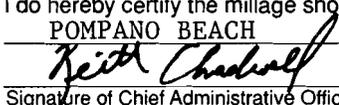
COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at POMPANO BEACH, Florida, this the 11TH day of OCTOBER, 2007

 CITY MANAGER 100 WEST ATLANTIC BOULEVARD - SUITE 430
Signature of Chief Administrative Officer and Title Mailing Address
POMPANO BEACH FL 33060 (954) 786-4601 (954) 786-4504
City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422 R. 01/03

SECTION I

2007 Year

To

Pompano EMS (Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. [X] Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD (County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only If Line 3 is Greater than ± 1%)

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only If Line 3 is Greater than ± 3%)

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at POMPANO BEACH, Florida, this 11TH day of OCTOBER, 20 07. [Signature] CITY MANAGER, 100 WEST ATLANTIC BOULEVARD - SUITE 430, POMPANO BEACH FL 33060

See Instructions on Reverse Side

Certification of Final Taxable Value

DR-422 R. 01/03

SECTION I

Pursuant to s. 200.065 (1),(5), F.S.

2007 Year

To

SFWMD-District

(Name of Taxing Authority)

BROWARD

(County)

County Municipality Multi-County/Water Management School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Notice: This completed form must be returned to the Property Appraiser no later than: 1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted. COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at West Palm Beach, Florida, this the 10th day of October, 2007

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

SFWMD-Okeechobee Basin

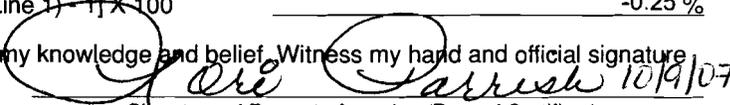
(Name of Taxing Authority)

| | | | |
|---------------------------------|--|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input checked="" type="checkbox"/> Multi-County/Water Management | |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|-----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 177,045,353,663 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 176,599,058,974 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.25 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

 Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|--------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | 0.0000 | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | 0.0000 | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | | | |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | | \$ | | per \$1,000 |
| | Name | | | |
| C. Municipal Service Taxing Unit (MSTU)* | | \$ | | per \$1,000 |
| | Name | | | |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Okeechobee Basin | \$ | 0.2797 | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

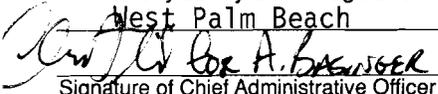
COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at West Palm Beach, Florida, this 10th day of October, 2007

 Finance Director
Signature of Chief Administrative Officer and Title

3301 Gun Club Road
Mailing Address

West Palm Beach FL 33406
City State Zip

(561)686-8800 (561)682-5295
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value
Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

S. Broward Hospital District
(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|----------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 53,069,667,673 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 52,934,475,717 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.25 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|-----------------------|----|--------------------|
| (4) VOTED DEBT Service Millage | | \$ | N/A per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | N/A per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 1.1643 per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | N/A per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | N/A per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | N/A per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | N/A per \$1,000 |
| | Discretionary | \$ | N/A per \$1,000 |
| | Capital Outlay | \$ | N/A per \$1,000 |
| | Additional | \$ | N/A per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | N/A per \$1,000 |
| | Basin | \$ | N/A per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|-----|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | N/A |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | N/A |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|-----|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | N/A |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | N/A |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Hollywood, Florida, this the 10th day of October, 20 07

[Signature] President & CEO
Signature of Chief Administrative Officer and Title

3501 Johnson Street
Mailing Address

Hollywood FL 33021
City State Zip

954-987-2020 X5096 954-985-2262
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Southwest Ranches

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,344,656,765 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,345,275,484 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.05 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. John Patrick 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|-----------------------|----|------------------|
| (4) VOTED DEBT Service Millage | | \$ | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | 3-00 per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | per \$1,000 |
| B. Dependent Special District* | _____ | \$ | per \$1,000 |
| | Name | | |
| C. Municipal Service Taxing Unit (MSTU)* | _____ | \$ | per \$1,000 |
| | Name | | |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | per \$1,000 |
| | Discretionary | \$ | per \$1,000 |
| | Capital Outlay | \$ | per \$1,000 |
| | Additional | \$ | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | per \$1,000 |
| | Basin | \$ | per \$1,000 |

Complete lines 6 through 7 only if the millage rate is being certified for COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|-------------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A) D, or E, As Applicable) divided by 1000) | \$ | 4,033,970 - |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Southwest Ranches, Florida, this 9th day of October, 2007

Leann Watson Finance Administrator 6589 SW 160th Ave
Signature of Chief Administrative Officer and Title Mailing Address Southwest Ranches FL 33331
Southwest Ranches Florida 33331 (954) 434-0008 (954) 434-1490
City State Zip Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value
Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Sunrise

(Name of Taxing Authority)

BROWARD

(County)

| | | | |
|---------------------------------|--|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management | |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 6,725,656,229 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 6,732,889,599 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | 0.11 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. [Signature] 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>0.0000</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>5.1232</u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|------------|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|------------|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | <u>N/A</u> |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | <u>N/A</u> |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Sunrise, Florida, this the 10th day of October, 2007

[Signature]
Signature of Chief Administrative Officer and Title

10770 West Oakland Park Blvd.
Mailing Address

Sunrise, FL 33351
City State Zip

(954) 746-3215 (954) 578-4809
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Special Tax District #1

(Name of Taxing Authority)

County Municipality Multi-County/Water Management
School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows (A-E) listing millage rates for VOTED DEBT, OTHER VOTED, NON-VOTED Operating Millage Rate, and SCHOOL/WATER MANAGEMENT DISTRICTS.

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than +/- 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than +/- 1%).

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than +/- 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than +/- 3%).

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Sunrise, Florida, this the 10th day of October, 2007

Signature of Chief Administrative Officer and Title, Mailing Address, City, State, Zip, Phone #, Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Tamarac

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 4,402,093,105 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 4,385,074,571 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.39 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida. *[Signature]* 10/9/07
Signature of Property Appraiser/Date of Certification

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1:00 P .m. October 12, 2007

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MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>0.0630</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>5.0496</u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County <u>Municipality</u> or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|--|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|--|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at _____, Florida, this the _____ day of _____, 20____

Jeffrey L. Miller City Manager, 7525 NW 88 Avenue
Signature of Chief Administrative Officer and Title Mailing Address

City Tamarac, FL State 33321 Zip (954) 597-3562 Phone # (954) 597-3560 Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Tindall Hammock
(Name of Taxing Authority)

| | | |
|---------------------------------|---|---|
| <input type="checkbox"/> County | <input type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input checked="" type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD
(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 246,780,440 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 242,436,770 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -1.76 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

[Signature]
Signature of Property Appraiser/Date of Certification 10/9/07

Notice: This completed form must be returned to the Property Appraiser no later than:
1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | | |
|--|-----------------------|----|---------------|--|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>2.5000</u> | | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | | | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | | per \$1,000 |
| | Discretionary | \$ | | | per \$1,000 |
| | Capital Outlay | \$ | | | per \$1,000 |
| | Additional | \$ | | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | | per \$1,000 |
| | Basin | \$ | | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Broward County Florida, this the 11 day of October, 2007

[Signature], Chairperson
Signature of Chief Administrative Officer and Title
Ft. Lauderdale, Florida 33304
City State Zip

1524 Coral Ridge Drive
Mailing Address
954-524-8526 954-524-8644
Phone # Fax #

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

West Park

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|-------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 652,745,849 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 651,475,491 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.19% |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida, 10/9/07
 Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:
 1:00 P .m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | |
|--|----|--------|-------------|
| (4) VOTED DEBT Service Millage | \$ | - 0 - | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | \$ | - 0 - | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | \$ | 6.5239 | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | \$ | - | per \$1,000 |
| B. Dependent Special District* | \$ | - | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | \$ | - | per \$1,000 |
| D. SCHOOL DISTRICT: | | | |
| Required Local Effort | \$ | - | per \$1,000 |
| Discretionary | \$ | - | per \$1,000 |
| Capital Outlay | \$ | - | per \$1,000 |
| Additional | \$ | - | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | | | |
| DISTRICT LEVY | \$ | - | per \$1,000 |
| Basin | \$ | - | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at West Park, Florida, this the 11th day of October, 2007

| | | | | | |
|---|--------------------|---------------------|---|--------------------------------|------------------------------|
| <u>West Park</u> City | <u>FL</u> State | <u>33023</u> Zip | <u>P.O. Box 5710</u> Mailing Address | <u>954-685-4804</u> Phone # | <u>954-685-4806</u> Fax # |
| Signature of Chief Administrative Officer and Title | | | | | |

See Instructions on Reverse Side

Certification of Final Taxable Value

DR-422 R. 01/03

SECTION I

Pursuant to s. 200.065 (1),(5), F.S.

2007 Year

To

Weston

(Name of Taxing Authority)

County Municipality Multi-County/Water Management School Independent Special Dist. Dependent Special Dist. Municipal Service Taxing Unit (MSTU)

BROWARD

(County)

Table with 3 rows: (1) Current Year Gross Taxable Value, (2) Final Current Year Gross Taxable Value, (3) Percentage of Change in Taxable Value

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

Table with 5 main rows: (4) VOTED DEBT Service Millage, (4a) OTHER VOTED Millage, (5) NON-VOTED Operating Millage Rate, A. PRINCIPAL TAXING AUTHORITY, B. Dependent Special District, C. Municipal Service Taxing Unit, D. SCHOOL DISTRICT, E. WATER MANAGEMENT DISTRICT

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (6) Unadjusted Gross Ad Valorem Proceeds, (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%)

*MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.

Table with 2 rows: (8) Unadjusted Gross Ad Valorem Proceeds, (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%)

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at City of Weston, Florida, this the 11th day of October, 2007

Signature of Chief Administrative Officer and Title Weston FL 33326

Mailing Address 17200 Royal Palm Boulevard Phone # 954-385-2000 Fax # 954-385-2010

See Instructions on Reverse Side

Certification of Final Taxable Value

Pursuant to s. 200.065 (1),(5), F.S.

DR-422
R. 01/03

SECTION I

2007 Year

To

Wilton Manors

(Name of Taxing Authority)

| | | |
|---------------------------------|--|---|
| <input type="checkbox"/> County | <input checked="" type="checkbox"/> Municipality | <input type="checkbox"/> Multi-County/Water Management |
| <input type="checkbox"/> School | <input type="checkbox"/> Independent Special Dist. | <input type="checkbox"/> Dependent Special Dist. |
| | | <input type="checkbox"/> Municipal Service Taxing Unit (MSTU) |

BROWARD

(County)

| | | | |
|--|--|----|---------------|
| (1) Current Year Gross Taxable Value | (From Line 4, Form DR-420) | \$ | 1,268,127,597 |
| (2) Final Current Year Gross Taxable Value | (From applicable Form DR-403 Series) | \$ | 1,266,748,892 |
| (3) Percentage of Change in Taxable Value | [(Line 2 divided by Line 1) - 1] X 100 | | -0.11 % |

I do hereby certify the values show herein to be correct to the best of my knowledge and belief. Witness my hand and official signature at Fort Lauderdale, Florida.

John Parrish 10/9/07
Signature of Property Appraiser/Date of Certification

Notice: This completed form must be returned to the Property Appraiser no later than:

1:00 P.m. October 12, 2007

FAILURE TO DO SO COULD CAUSE LOSS OF REVENUE TO YOUR TAXING AUTHORITY.

MILLAGE RATE ADOPTED BY RESOLUTION OR ORDINANCE AT FINAL BUDGET HEARING PURSUANT TO S. 200.065(2)(d), F.S.

SECTION II

| | | | | |
|--|-----------------------|----|---------------|-------------|
| (4) VOTED DEBT Service Millage | | \$ | <u>.1879</u> | per \$1,000 |
| (4a) OTHER VOTED Millage (In Excess of the Millage Cap and not to Exceed Two Years) | | \$ | | per \$1,000 |
| (5) NON-VOTED Operating Millage Rate (From Resolution or Ordinance) | | \$ | <u>5.1340</u> | per \$1,000 |
| A. PRINCIPAL TAXING AUTHORITY (County, Municipality, or Independent Special District*) | | \$ | | per \$1,000 |
| B. Dependent Special District* | Name _____ | \$ | | per \$1,000 |
| C. Municipal Service Taxing Unit (MSTU)* | Name _____ | \$ | | per \$1,000 |
| D. SCHOOL DISTRICT: | Required Local Effort | \$ | | per \$1,000 |
| | Discretionary | \$ | | per \$1,000 |
| | Capital Outlay | \$ | | per \$1,000 |
| | Additional | \$ | | per \$1,000 |
| E. WATER MANAGEMENT DISTRICT: | DISTRICT LEVY | \$ | | per \$1,000 |
| | Basin | \$ | | per \$1,000 |

Complete Lines 6 through 9 only if the millage is to be administratively adjusted.

COUNTIES, MUNICIPALITIES, SCHOOLS, and WATER MANAGEMENT DISTRICTS, MAY adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 1% pursuant to s. 200.065(5), F.S.

| | | |
|---|----|--|
| (6) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (A, D, or E, As Applicable) divided by 1000) | \$ | |
| (7) Adjusted Millage Rate (Only if Line 3 is Greater than ± 1%). (Line 6 divided by Line 2) X 1000 | \$ | |

***MSTU's and Special Districts (As Determined by Department of Community Affairs) May adjust the non-voted millage rate ONLY if the percentage shown on Line 3 is greater than ± 3% pursuant to s. 200.065(5), F.S.**

| | | |
|---|----|--|
| (8) Unadjusted Gross Ad Valorem Proceeds (Line 1 X Line 5 (B or C, As Applicable) divided by 1000) | \$ | |
| (9) Adjusted Millage Rate (Only if Line 3 is Greater than ± 3%). (Line 8 divided by Line 2) X 1000 | \$ | |

I do hereby certify the millage show to be correct to the best of my knowledge and belief. Witness my hand and official signature at Wilton Manors, Florida, this the eleventh day of October, 20 07.

[Signature]
Signature of Chief Administrative Officer and Title
Wilton Manors Florida 33305
City State Zip

524 NE 21 Court
Mailing Address
(954) 390-2120 (954) 390-2199
Phone # Fax #

See Instructions on Reverse Side