

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15273

1. Entity Name

POMPANO BEACH HIGHLANDS CIVIC IMPROVEMENT ASSOCI

Principal Place of Business

1650 NE 50 CT.
POMPANO BEACH FL 33064

Mailing Address

POST OFFICE BOX 5788
LIGHTHOUSE POINT FL 33074
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0057983

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, JEANNE
1855 NE 48 CT
POMOANO BEACH FL 33064

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Jeanne Stewart
Signature typed or printed name of registered agent and title if applicable.

Jeanne Stewart

(NOTE: Registered Agent signature required when reinstating)

2/1/01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP O'BRIEN, ROLLIN 4150 NE 12 AVE POMPANO BEACH FL 33064	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROLANO, NOEL 1571 NE 42 ST. POMPANO BEACH FL 33064	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEWART, JEANNE 1855 NE 48 CT POMPANO BEACH FL 33064	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOWER, LOREN 5034 N FEDERAL HWY POMPANO BEACH FL 33064	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROWE, BARBARA 3781 NE 16 TERR POMPANO BCH FL 33064	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUJAN, KENNETH 1410 NE 40 CT POMPANO BEACH FL 33064	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Paula Day (T) 3710 NE 16 Terrace Pompano Beach, Fl. 33064	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeanne Stewart
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/01 954-429-8597
Date Daytime Phone #

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90174 007 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)