

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
 05-01-2002 91539 001 ****75.00

0072234

DOCUMENT # N15273

1. Entity Name

POMPANO BEACH HIGHLANDS CIVIC IMPROVEMENT ASSOCIATION, INC.

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
 POMPANO 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)

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 **D.** ☐ Delete
 NAME **O'BRIEN, ROLLIN**
 STREET ADDRESS **4150 NE 12 AVE**
 CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **D.** ☐ Delete
 NAME **ROLANO, NOEL**
 STREET ADDRESS **1571 NE 42 ST**
 CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **P** ☐ Delete
 NAME **STEWART, JEANNE**
 STREET ADDRESS **1855 NE 48 CT**
 CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **VP** ☐ Delete
 NAME **BOWER, LOREN**
 STREET ADDRESS **5034 N FEDERAL HWY**
 CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **S** ☐ Delete
 NAME **ROWE, BARBARA**
 STREET ADDRESS **3781 NE 16 TERR**
 CITY-ST-ZIP **POMPANO BCH FL 33064**

TITLE **D** ☐ Delete
 NAME **KUJAN, KENNETH**
 STREET ADDRESS **1410 NE 40 CT**
 CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **VP-3781 NE 16 Terr** ☐ Change ☐ Addition
 NAME **POMPANO BEACH FL 33064**
 STREET ADDRESS **BARBARA ROWE**
 CITY-ST-ZIP

TITLE **D-Joseph Reese** ☐ Change ☐ Addition
 NAME **1210 NE 40 ST**
 STREET ADDRESS **POMPANO Bch. FL 33064**
 CITY-ST-ZIP

TITLE **WILLIAM LASON** ☐ Change ☐ Addition
 NAME **1560 NE 44 ST**
 STREET ADDRESS **Pompano Bch FL 33064**
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP

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 CITY-ST-ZIP

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

Jeanne Stewart

Date

Daytime Phone #

CR2E037 (9/01)