

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000001011

1. Entity Name

POMPANO BEACH SEAFOOD FESTIVAL CORPORATION

Principal Place of Business

Mailing Address

P O BOX 50025
LIGHTHOUSE POINT FL 33074
US

P O BOX 50025
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

65-0398663

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

JOHN C GOOD
1300 SE 13TH AVE
DEERFIELD BCH FL 33441

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

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

(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 P ☐ Delete
NAME CORRELL, GARY
STREET ADDRESS PO BOX 699030 NA
CITY-ST-ZIP MIAMI FL

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

TITLE VP ☐ Delete
NAME MAUS, PHIL
STREET ADDRESS PO BOX 5190 NA
CITY-ST-ZIP LIGHTHOUSE POINT FL

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

TITLE T ☐ Delete
NAME EBERT, STEVE
STREET ADDRESS 1900 N FEDERAL HWY
CITY-ST-ZIP POMPANO BEACH FL 33062

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

TITLE T ☐ Delete
NAME SEITZ, CHARLES
STREET ADDRESS 125 N RIVERSIDE DR
CITY-ST-ZIP POMPANO BEACH FL

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

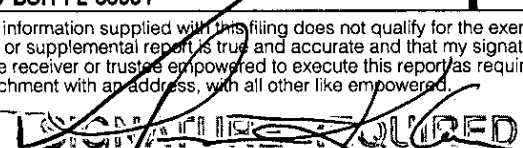
TITLE S ☐ Delete
NAME GIORGIO, THOMAS D
STREET ADDRESS 1701 EAST ATLANTIC BLVD #5
CITY-ST-ZIP POMPANO BEACH FL

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

TITLE T ☐ Delete
NAME CARR, PATRICIA
STREET ADDRESS 1661 E SAMPLE RD
CITY-ST-ZIP POMPANO BCH FL 33064

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: 

5-1-01

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1707785

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90178 020 ****70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)