

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000001011

FILED
May 01, 2008
Secretary of State

Entity Name: POMPANO BEACH SEAFOOD FESTIVAL CORPORATION

Current Principal Place of Business:

2200 E ATLANTIC BLVD.
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 50025
LIGHTHOUSE POINT, FL 33074 US

New Mailing Address:

FEI Number: 65-0398663 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORRELL, GARY
Address: PO BOX 699030 NA
City-St-Zip: MIAMI, FL

Title: VP () Delete
Name: HARPEST, ROBERT
Address: 855-1001 S. FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: SANDERHOFF, SANDI
Address: 2200 E. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33062

Title: SEC () Delete
Name: DUFRESNE, ANNE
Address: 2200 EAST ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: MCCARVER, ROBERT I
Address: 4221 NE 22 TERR.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: T () Delete
Name: MELLGREN, LAWRENCE
Address: 5400 NORTH OCEAN BLVD. #32
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C. GOOD

RA

05/01/2008

Electronic Signature of Signing Officer or Director

Date