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FILED

Mar 10 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N48672 (2)

1. Corporation Name

POMPANO YACHT AND BEACH CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

140 NE 28TH AVENUE  
#105  
POMPANO BEACH FL 33062  
US140 NE 28TH AVENUE  
# 105  
POMPANO BEACH FL 33062-4953  
US3. Date Incorporated or Qualified  
05/01/19923a. Date of Last Report  
02/20/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

4. FEI Number

65-0346522

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARTHE, FREDERIC M

~~3600 N. MILITARY TRAIL~~ 878 SOUTHEAST THIRD AVENUE  
FOURTH FLOOR SUITE 400

BOCA RATON FL 33488

FORT LAUDERDALE FL 33316

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME DAVIS-SOUCY, CLAIRE  
STREET ADDRESS 140 NE 28TH AVE., #103 101  
CITY-ST-ZIP POMPANO BEACH FL 33062

DELETE

1.1 TITLE P/T/D  
1.2 NAME DAVIS-SOUCY CLAIRE  
1.3 STREET ADDRESS 140 N.E. 28TH AVE #101  
1.4 CITY-ST-ZIP POMPANO BEACH FL 33062

Change Addition

TITLE VPD  
NAME VERONNEAU, ROBERT  
STREET ADDRESS 140 NE 28TH AVE., #103 506  
CITY-ST-ZIP POMPANO BEACH FL 33062

DELETE

2.1 TITLE VPD  
2.2 NAME VERONNEAU ROBERT  
2.3 STREET ADDRESS 140 NE 28TH AVE #506  
2.4 CITY-ST-ZIP POMPANO BEACH FL 33062

Change Addition

TITLE SD  
NAME CARON, ROSEMOND  
STREET ADDRESS 140 NE 28TH AVE., #103 206  
CITY-ST-ZIP POMPANO BEACH FL 33062

DELETE

3.1 TITLE SD  
3.2 NAME CARON ROSEMOND  
3.3 STREET ADDRESS 140 NE 28TH AVE #206  
3.4 CITY-ST-ZIP POMPANO BEACH FL 33062

Change Addition

TITLE TD  
NAME CARON, LOUIS  
STREET ADDRESS 140 NE 28TH AVE., #103 107  
CITY-ST-ZIP POMPANO BEACH FL 33062

DELETE

4.1 TITLE D  
4.2 NAME CARON LOUIS  
4.3 STREET ADDRESS 140 NE 28TH AVE #107  
4.4 CITY-ST-ZIP POMPANO BEACH FL 33062

Change Addition

TITLE  
NAME PAULINE DUBOIS  
STREET ADDRESS 140 NE 28TH AVE. #402  
CITY-ST-ZIP POMPANO BEACH FL 33062

DELETE

5.1 TITLE TD  
5.2 NAME DUBOIS PAULINE  
5.3 STREET ADDRESS 140 NE 28TH AVE. #402  
5.4 CITY-ST-ZIP POMPANO BEACH FL 33062

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0021746

CR2E037 (9/96)