

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729326

Entity Name: POMPANO BEACH CLUB NORTH ASSOCIATION, INC.

Current Principal Place of Business:

101 BRINY AVE.
POMPANO BEACH, FL 33062

Current Mailing Address:

C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024 US

FEI Number: 59-1616913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RANDALL K.ROGER AND ASSOCIATES PA
621 NE 53RD ST
STE 300
BOCA RATON, FL 33487 US

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

Officer/Director Detail :

Title P
Name LANTZ, STEVE
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title TREASURER
Name DERY, BOB
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title VP
Name LESBURT, HENRY
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title SECRETARY
Name FRANKEL, CAROL
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name BARNETT, LARRY
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name PAPPAS, MOLLY
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name VERDONE, PETE
Address C/O AMERICAN MANAGEMENT GROUP I, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

I hereby 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 all other like empowered.

SIGNATURE: STEVE LANTZ

PRESIDENT

03/09/2015

Electronic Signature of Signing Officer/Director Detail

Date