

NONPROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

08-02-2000 90157030 \*\*\*\*61.25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 SEP -6 AM 8:19

DOCUMENT # 701443

AMENDED

1. Corporation Name

Pompano Players, Inc.

Principal Place of Business

Mailing Address

2630 NE 9th TERR.

P.O. Box 2045

Pompano Bch, FL 33064

Pompano Bch, FL 33061

Principal Place of Business

2630 NE 9th Terrace

Suite, Apt. #, etc.

City & State

Pompano Beach FL

Zip Country

33064 USA

2a. Mailing Address

26 P.O. Box 2045

Suite, Apt. #, etc.

City & State

Pompano Beach FL

Zip Country

33061 USA

3. Date Incorporated or Qualified

4. FEI Number

237102768

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

Mitch Nowak  
275 IMPERIAL LANE  
LAUDERDALE BY THE SEA, FL 33302

10. Name and Address of New Registered Agent

81 Name KATHERINE H. VELLIS  
82 Street Address (P.O. Box Number is Not Acceptable) 2900 NE 14th Street  
83 #702  
84 City Pompano Beach FL 85 Zip Code 33062

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 Katherine H. Vellis Katherine H. Vellis DATE 7-24-00

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
<p>PRESIDENT <input checked="" type="checkbox"/> DELETE MITCH NOWAK 275 IMPERIAL LANE LAUDERDALE BY THE SEA FL</p>	<p>1.1 TITLE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME KATHERINE H. VELLIS 1.3 STREET ADDRESS 2900 NE 14th STREET / #702 1.4 CITY-ST-ZIP POMPAÑO BEACH, FL 33062</p>
<p>TREASURER <input checked="" type="checkbox"/> DELETE CHRISTINE SHERRY STEINBERG 1611 NE 51 ST STREET FT LAUDERDALE FL 33334</p>	<p>2.1 TITLE TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME KATE POWERS 2.3 STREET ADDRESS 3100 S. DIXIE HWY #A-29 2.4 CITY-ST-ZIP BOCA RATON, FL 33432</p>
<p>VICE PRESIDENT <input checked="" type="checkbox"/> DELETE KATE POWERS 1561 NE 31st STREET POMPAÑO BEACH, FL 33064</p>	<p>3.1 TITLE VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME MARY GOULART 3.3 STREET ADDRESS 2630 NE 9th TERRACE 3.4 CITY-ST-ZIP POMPAÑO BEACH, FL 33064</p>
<p>SECRETARY <input checked="" type="checkbox"/> DELETE GAIL KIRBY 3336 SEA BREEZE LANE MARGATE, FL 33063</p>	<p>4.1 TITLE SECRETARY DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME JEAN NAGLER 4.3 STREET ADDRESS 332 SE 18th AVENUE 4.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33441</p>
<p>DIRECTOR <input checked="" type="checkbox"/> DELETE JO LEERS 3424 SE 12th St. C3 POMPAÑO BEACH, FL 33062</p>	<p>5.1 TITLE DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME DAWN WALKER 5.3 STREET ADDRESS 2933 NE 1st TERRACE 5.4 CITY-ST-ZIP WILTON MANORS, FL 33334</p>
<p>DIRECTOR <input checked="" type="checkbox"/> DELETE ARTHUR KLEIVENS 1600 GREEN ROAD POMPAÑO BEACH, FL 33064</p>	<p>6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP</p>

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 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, with all other like empowered.

SIGNATURE: Kate Powers Kate Powers DATE 7/24/00 (561) 347-5045