2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
Apr 19, 2000 8:00 am
Secretary of State
03-20-2000 90088 033 ****61.25

DOCUMENT # 707072

1. Entity Name

POMPANO LODGE INC

Principal Place of Business	Mailing Address
800 PINE DRIVE POMPANO BEACH FL 33060	800 PINE DRIVE POMPANO BEACH FLA 33060-7270

DO NOT WRITE IN THIS SPACE

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 59-1088433 ☐ 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
BERRY, GEORGE C. 800 PINE DR #11 POMPANO BEACH FL 33060	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D QUINN, LILLIAN 800 PINE DR APT 17 POMPANO BCH FL 33060	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS PERRY, MILDRED E. 800 PINE DR #1 POMPANO BCH FL 33060	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary D Christine Roberts 800 Pine Dr #4 Pompano Beach, FL 33060 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEAUMONT, JOHN 800 PINE DRIVE., #16 POMPANO BEACH FL 33060	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mimi LaBillois ~~VPD~~ VP D 800 Pine Drive #3 Pompano Beach, FL. FL. 33060 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COURSCHENE, JOHN CLAUDE 800 PINE DR #13 POMPANO BCH FL 33060	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P D BERRY, GEORGE C. 800 PINE DR #11 POMPANO BCH FL 33060	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LA POINTE, ANDRE 800 PINE DR #10 POMPANO BEACH FL 33060	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Christine Roberts (Sec.) 3/14/00 954-788-6989
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #