

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 27 AM 11:47

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 737764 (1)
1. Corporation Name
LAUDERDALE DEBUTANTE PRESENTATION COMMITTEE, INC

Principal Place of Business Mailing Address
**4000 HOLLOWELL
2748 NE 27TH CT
FT LAUDERDALE FL 33306**
**2735 NE 10TH ST
POMPANO BCH FL 33062
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/07/1977** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-1738901** 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 c/o William A. Webb 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 2735 NE 10 Street 27
City & State City & State
23 Pompano Beach, FL 28
Zip Country Zip Country
24 33062 25 USA 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEBB, WILLIAM A
2735 NE 10TH ST
POMPANO BCH FL 33062**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE **WILLIAM A. WEBB**

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

(NOTE: Registered Agent signature required when reappointing)

4/20/95
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
X	DREYFUS, RONALD	2785 NE 33 CT	FT. LAUDERDALE FL
T	WEBB, WILLIAM A	2735 NE 10TH ST	POMPANO BCH FL
D	RAMSEY, JAMES C	2824 NE 25TH CT	FT. LAUDERDALE FL
D	BENSON, ERIC	2609 NE 26TH AVE	FT LAUDERDALE FL
P	HOLLOWELL, SAM	2748 NE 27TH CT	FT. LAUDERDALE FL
D	SERAFINO, PAT	909 SE 9 CT	FT. LAUDERDALE FL

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P			33306	☒	☒
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
			33062	☐	☒
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
			33305	☐	☒
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
			33306	☐	☒
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
D			33306	☐	☒
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
D	BRUNT, BRUCE	8699 SW 51 PLACE	COOPER CITY, FL 33228	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

WILLIAM A. WEBB
Signature and typed or printed name of signing officer or director

4/20/95 (305)946-7492
Date Telephone #