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CORPORATION ANNUAL REPORT **1995**

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

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DIVISION OF CORPORATIONS
95 MAR 31 PM 3:34

DOCUMENT # **737867** **(2)**

1. Corporation Name

GREATER POMPANO BEACH SENIOR CITIZENS CLUB,INC.

Principal Place of Business	Mailing Address
POMPANO CIVIC CENTER 1801 NE 6 ST POMPANO BEACH FL 33060 US	P.O. BOX 2104 POMPANO BEACH FL 33061 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/19/1977
3a. Date of Last Report: 04/08/1994
4. FEI Number: 59-1818548 ☐ 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. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

9. Name and Address of Current Registered Agent

~~WILSON, JOHN C.~~
~~600 PINE DR. APT. 112~~
~~POMPANO BEACH FL 33060~~

10. Name and Address of New Registered Agent

81 Name: GERALD BARTOS
82 Street Address (P.O. Box Number is Not Acceptable): 257 S.CYPRESS RD. Apt. 441
83 POMPANO BEACH, FL. 33060
84 City: POMPANO BEACH FL 85 Zip Code: 33060

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: ~~GERALD BARTOS~~ GERALD BARTOS, PRESIDENT Gerald A. Bartos 2/18/95
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P ~~WILSON, JOHN C.~~ GERALD BARTOS ~~600 PINE DRIVE~~ 257 S.Cypress Rd. ~~POMPANO BCH. FL 00000~~ 33060 Apt.441	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ~~BARTOS, GERALD~~ WILSON, JOHN C. ~~257 S.CYPRESS RD. #441~~ 600 Pine Dr. APT.112 ~~POMPANO BEACH FL 33060~~ (same)	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMSON, FRANCES 675 E 48 ST. #350 POMPANO BEACH FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ESTHER MUNSHEN 259 S CYPRESS RD. 536 POMPANO BEACH, FL 00000	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROGERS, J. GAYLE 257 S. CYPRESS RD. #443 POMPANO BEACH FL	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARTOS, GEAN 257 S. CYPRESS DR #441 POMPANO BEACH FL	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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 no address.

SIGNATURE: GERALD BARTOS Gerald A. Bartos 2/18/95 305-943-8405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #