

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90238 042 ****61.25

DOCUMENT # 737867

1. Entity Name

GREATER POMPANO BEACH SENIOR CITIZENS CLUB, INC.

Principal Place of Business

POMPANO CIVIC CENTER
 1801 NE 6 ST
 POMPANO BEACH FL 33060
 US

Mailing Address

P.O. BOX 2104
 POMPANO BEACH FL 33061
 US

766508



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1818548

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BARTOS, GERALD
 257 S. CYPRESS RD.
 APARTMENT 441
 POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name

DORIS O'CONNOR

Street Address (P.O. Box Number is Not Acceptable)

415 N.E. 23RD AVE.

City

POMPANO BEACH

FL

Zip Code

33062

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

Doris O'Connor

4/26/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE **D** ☒ Delete
 NAME BARTOS, GERALD
 STREET ADDRESS 257 S CYPRESS RD #441
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE **D** ☒ Delete
 NAME WILSON, JOHN
 STREET ADDRESS 600 PINE DR APT 112
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE **D** ☐ Delete
 NAME DORIS O'CONNOR
 STREET ADDRESS 415 N. E. 23RD AVE.
 CITY-ST-ZIP POMPANO BEACH FL

TITLE **D** ☐ Delete
 NAME UPRIGHT, DORIS
 STREET ADDRESS 802 SEC 7TH ST E-101
 CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE **D** ☐ Delete
 NAME ROGERS, J. GAYLE
 STREET ADDRESS 257 S. CYPRESS RD. #443
 CITY-ST-ZIP POMPANO BEACH FL

TITLE **D** ☐ Delete
 NAME DODGE, CHARLES
 STREET ADDRESS 5335 W HILLSBORO, LOT 728
 CITY-ST-ZIP DEERFIELD BEACH FL 33062

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME DORIS O'CONNOR
 STREET ADDRESS 415 N.E. 23RD AVE.
 CITY-ST-ZIP POMPANO BEACH, FL 33062

TITLE **VICE PRESIDENT (1ST)** ☒ Change ☐ Addition
 NAME CHARLES DODGE
 STREET ADDRESS 5335 W. HILLSBORO LOT 728
 CITY-ST-ZIP COCONUT CREEK, FL 33073

TITLE **RECORDING SECRETARY** ☒ Change ☐ Addition
 NAME ROSE ANN LONG
 STREET ADDRESS 3811 N.E. 17 AVE.
 CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE **TREASURER** ☐ Change ☐ Addition
 NAME DORIS UPRIGHT
 STREET ADDRESS 802 S.E. 7TH ST E101
 CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE **CORRESPONDING SEC.** ☐ Change ☐ Addition
 NAME J. GAYLE ROGERS
 STREET ADDRESS 257 S. CYPRESS RD #443
 CITY-ST-ZIP POMPANO BEACH, FL 33060

TITLE **2ND VICE PRES.** ☒ Change ☐ Addition
 NAME RICHARD SIMPSON
 STREET ADDRESS 6880 N.W. 26TH ST.
 CITY-ST-ZIP MARGATE, FL 33063

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: **DORIS O'CONNOR** **TREASURER** 4/26/01 (954) 422-9444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)