

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 18, 2007 8:00 am
Secretary of State

06-25-2007 90004 005 ****61.25

DOCUMENT # 748741 1. Entity Name POMPANO COURTS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3277 NW 114TH TERRACE CORAL SPRINGS, FL 33065 US			Mailing Address PO BOX 8285 CORAL SPRINGS, FL 33075 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2067189	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent WILLARD, ROBIN 3277 NW 114TH TERRACE CORAL SPRINGS, FL 33065			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Robin Willard</u> <u>6/18/07</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BROWN, LAURA 510 SW 15TH ST. #106 POMPANO BEACH, FL 33060	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Kruith, Laura Brown 3928 Seward Ave Rockford, IL 61108-7659	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD VAGI, ROBERT 4451 SW 34TH DR FORT LAUDERDALE, FL 33312	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Vagi, Robert 4451 SW 34th Drive FORT LAUD. FL. 33312	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TDSD BELBEN, VALERIE 510 SW 15TH ST #104 POMPANO BEACH, FL 33060	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD Belben, Valerie 510 SW 15th St #2 Pompamo Beach Fl. 33060	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Dyer, Jonathan Caleb 520 SW 15th Street #102 Pompamo Beach, Fl. 33060	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>x Valerie S. L. Belben</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>7/16/07</u> <u>954-468-2214</u> Date Daytime Phone #		

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