


FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # J02705 (8)
1. Corporation Name
POMPAÑO REALTY, INC.

Principal Place of Business
1800 SOUTHWEST THIRD STREET
POMPAÑO BEACH FL 33069

Mailing Address
P. O. BOX 11889
LEXINGTON KY 40578

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
03/07/1986

4. FEI Number
59-2661003

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
THOBURN, THEODORE G
COMERICA BANK & TRUST, FSB
2401 PGA BLVD., STE. 198
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE D ☒ DELETE
NAME SIMON, WILLIAM E JR.
STREET ADDRESS 310 SOUTH STREET
CITY-ST-ZIP MORRISTOWN NJ 07960
TITLE DP ☐ DELETE
NAME CASHMAN, JOHN A JR.
STREET ADDRESS 2469 IRON WORKS PIKE
CITY-ST-ZIP LEXINGTON KY 40578
TITLE VTS ☐ DELETE
NAME LANG, MICHAEL J
STREET ADDRESS 2469 IRON WORKS PIKE
CITY-ST-ZIP LEXINGTON KY 40578
TITLE D ☐ DELETE
NAME TOLLESON, ROY M JR.
STREET ADDRESS 5 TENNIS ROAD FARMINGTON
CITY-ST-ZIP CHARLOTTESVILLE VA 22901
TITLE D ☐ DELETE
NAME VAN LENNEP, MARY
STREET ADDRESS 3377 NORTH OCEAN BLVD.
CITY-ST-ZIP DELRAY BEACH FL 33483
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 1/9/98 606231-8768