Applied For

\$8.75 Additional

Fee Required

Not Applicable

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 1. Corporation Name

POMPANO FAN CLUB, INC.

1 PAMPANO SQUARE

US

POMPANO BEACH FL 33062

2. Principal Place of Business

Suite, Apt. #, etc.

Principal Place of Business Mailing Address ATTN: TAX DEPARTMENT

7880 BENT BRANCH DRIVE. SUITE 100

IRVING TX 75063

2a. Mailing Address

Suite, Apt. #, etc.

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90051 049 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

10/12/198<u>9</u>

04-3068565

22		27						
City & State	<u> </u>	City & State		_		6Election Campaign Financing	\$5.00	
23		28				: Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	untry		8. This corporation owes the current ye	ar Intangible	
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regist	ered Agent	
				81	Name			
UNITED STATES CORPORATION COMPANY 1201 HAYES STREET #105					Ctract Addr	ess (P.O. Box Number is Not Acceptable)		_
					Street Addi	ess (P.O. Box Number is Not Acceptable)		
TALL	LAHASSEE FL 32301			83				
	<b></b>			$\sqcup$				0-4-
				84	City		<b>FI</b>  85   Zip	Code
44 5 .	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	and 607 1600 Florida St	tatutoe the s	hove	named com	oration submits this statement for the purpo	se of changing its	registered
office or o	egistered agent or both in the State of	f Florida. Such change wa	as authorized	a by th	e corporation	on's board of directors. I hereby accept the	appointment as re	gistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505,	, Florida Stat	tutes.				
SIGNATURE					<del>, , ,</del>	d when reinstating) DA	TE	
12	Signature, typed or printed name of registered agent a OFFICERS AND		NOTE: Registered		agnature require	d when reinstating) DA ADDITIONS/CHANGES TO OFFICER		ORS IN 12
12.	<del>,</del>	DELETE					☐ Change	☐ Addition
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NAME	PARKS, RALPH T.							
STREET ADDRESS	,			TREET A				
CITY-ST-ZIP	IRVING TX			ITY-ST-	ZIP		Change	Addition
TITLE	TD	☐ DELETE					□ Glialige	
NAME	ROACH, DONALD V		2.2 N	IAME				
STREET ADDRESS	7880 BENT BRACH DR. #100		. 2.3 S	TREET A	DDRESS			
CITY-ST-ZIP	IRVING TX 75063			CITY-ST-	ZIP			
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	1 7		3.2 N		A1	ANGY L. WINTON	Change	
STREET ADDRESS	MAYER, MARK W	_ Beech	3.2 N		ì	ANGY L. WINTON	Change	
	MAYER, MARK W 7880 BENT BRANCH DR #100		3.2 N 3.3 S	IAME	DORESS	ANCY L. WINTON		
STREET ADDRESS	MAYER, MARK W	□ DELETI	3.2 N 3.3 S 3.4 C	IAME STREET A CITY-ST-	DORESS	ANCY L. WINTON	Change	Addition
STREET ADDRESS CITY-ST-ZIP	MAYER, MARK W 7880 BENT BRANCH DR #100 IRVING TX VPD		3.2 N 3.3 S 3.4 C E 4.1 TI	IAME STREET A CITY-ST-	DORESS	ANCY L. WINTON		☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	MAYER, MARK W 7880 BENT BRANCH DR #100 IRVING TX VPD ALBERT, CHARLES M		32 N 33 S 34 C E 4.1 Ti 4.2 N	IAME STREET A CITY-ST- TILE	DDRESS ZIP	ANCY L. WINTON		Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MAYER, MARK W 7880 BENT BRANCH DR #100 IRVING TX VPD ALBERT, CHARLES M 7880 BENT BRANCH DR #100 IRVING TX AS WANTON, NANCY L	☐ DELETI	32N 33S 34 C E 4.1Ti 4.2N 4.3S 4.4C E 5.1Ti 52N	IAME STREET A CITY-ST- ITLE NAME STREET A CITY-ST-	DDRESS ZIP  DDRESS ZIP		☐ Change	_
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officer of director of the corporation or the receiver or trustee and the corporation of the corporation of 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, with all other like empowered.

SIGNATURE:

NANCY LIVINTON E RESIL

912-501-5000

CKZE034 (11/98)