**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 21, 2002 8:00 am DOCUMENT # L22372 **Secretary of State** 1. Entity Name 02-21-2002 90135 004 \*\*\*150.00 POMPANO FAN CLUB, INC. Principal Place of Business Mailing Address 1 PAMPANO SQUARE ATTN: TAX DEPARTMENT 7880 BENT BRANCH DRIVE. SUITE 100 POMPANO BEACH FL 33062 IRVING TX 75063 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 04-3068565 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES STREET #105 TALLAHASSEE FL 32301 City Zin 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 SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE TITLE ☐ Change ☐ Addition NAMÉ NAME NEVILLE. SHAWN R STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR #100 CITY-ST-ZIP CITY-ST-ZIP **IRVING TX** VP /D Change Addition TITLE ☐ Delete TITLE 40 D- APPLBAUM NAME NAME SITES, TIMOTHY D STREET ADDRESS STREET ADDRESS 7880 BENT BRACH DR. #100 CITY-ST-ZIP CITY-ST-ZIP IRVING TX 75063 NG (25GA TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME WINTON, NANCY L STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR #100 CITY-ST-ZIP CITY-ST-ZIP IRVING TX Addition TITLE ☐ Delete TITLE WARREN Z. COLTER NAME NAME RODRIGUEZ, VIKKI STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR. #100 CITY-ST-ZIP CITY-ST-ZIP **IRVING TX 75063** ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SINGLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/02 (972) 501-5600 Date Daytime Phone #