

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006734

FILED
May 17, 2010
Secretary of State

Entity Name: POMPANO TERRACE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1530 NW 3RD AVENUE
POMPANO BCH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1530 NW 3RD AVENUE
POMPANO BCH, FL 33060

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LARKIN, TIMOTHY
1530 NW 3RD AVENUE
POMPANO BCH, FL 33060 US

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: LARKIN, TIMOTHY
Address: 1530 NW 3 AVE
City-St-Zip: POMPANO BCH, FL 33060

Title: P
Name: LARKIN, TIMOTHY
Address: 1530 N.W. 3RD AVENUE
City-St-Zip: POMPANO BCH, FL 33060

Title: DV
Name: SMITH, DEXTER
Address: 152 NW 15 PL
City-St-Zip: POMPANO BCH, FL 33060

Title: DS
Name: JONES, BARBARA
Address: 1540 NW 3RD AVENUE
City-St-Zip: POMPANO BCH, FL 33060

Title: T
Name: CONEY, ROSA
Address: 148 NW 15 PL
City-St-Zip: POMPANO BEACH, FL 33060

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA JONES

DS

05/17/2010

Electronic Signature of Signing Officer or Director

Date