

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001930

FILED  
Mar 31, 2008  
Secretary of State

Entity Name: THE PEOPLE OF POMPANO, INC.

## Current Principal Place of Business:

305 N. POMPANO BEACH BLVD.  
1511  
POMPANO BEACH, FL 33062

## New Principal Place of Business:

## Current Mailing Address:

C/O 305 N POMPANO BCH BLVD STE 1511  
POMPANO BEACH, FL 33062

## New Mailing Address:

305 N. POMPANO BEACH BLVD.  
1511  
POMPANO BEACH, FL 33062

FEI Number: 04-3673488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORDON, BARBARA L  
305 N POMPANO BCH BLVD STE 1511  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

GORDON, BARBARA L MRS.  
305 N POMPANO BCH BLVD  
1511  
POMPANO BEACH, FL 33062 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: BARBARA L GORDON

03/31/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GORDON, BARBARA L  
Address: 305 N POMPANO BCH BLVD STE 1511  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: SIMROSS, LYNN  
Address: 3406 ROBBINS RD  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: GLAFF, JACQUILINE  
Address: 342 DOVER RD  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: CASTENHOLZ, PORTIA  
Address: 2251 NE 8TH CT  
City-St-Zip: POMPANO BEACH, FL 33062

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GLAFF, JACQUILINE  
Address: 3420 DOVER RD  
City-St-Zip: POMPANO BEACH, FL 33062

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BARBARA L GORDON

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03/31/2008

Electronic Signature of Signing Officer or Director

Date