

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010364

FILED
Apr 29, 2004
Secretary of State

Entity Name: POMPANO BEACH HIGH SCHOOL MUSIC PARENTS ASSOCIATION, INC.

Current Principal Place of Business:

2311 N.E. 27TH TERRACE
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2311 N.E. 27TH TERRACE
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 20-1062502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSE, NANCY
2311 N.E. 27TH TERRACE
POMPANO BEACH, FL 33062

Name and Address of New Registered Agent:

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: D () Delete
Name: MASSE, NANCY
Address: 2311 N.E. 27TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: GOLDBERG, JANE
Address: 2311 N.E. 27TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: GILLIAM, KIM
Address: 2311 N.E. 27TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: BELOTTO, KATHY
Address: 2311 N.E. 27TH TERRACE
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: () Change () Addition
Name:
Address:
City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NANCY MASSE

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date