


2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N04000001462	
1. Entity Name POMPANO BEACH HIGH SCHOOL BOOSTER CLUB, INC.	

Principal Place of Business 600 NE 13TH AVE POMPANO BEACH, FL 33064	Mailing Address 600 NE 13TH AVENUE POMPANO BEACH, FL 33064
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent MARTINEZ, JOHANNA P 600 NE 13TH AVENUE POMPANO BEACH, FL 33064

FILED
06 AUG -7 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08022006 Chg-NP CR2E037 (4/06)

4. FEI Number 11-3721555	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE JOHANNA MARTINEZ, Pres 
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, JOHANNA 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Recording Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Sherry Scharf S 600 NE 13th Ave Pompano Beach FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STANWYCK, JUDY 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Corresponding Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michelle Carmichael S 600 NE 13th Ave Pompano Beach FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PESEUX, ANGELA 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Fred Roccanti D 600 NE 13th Ave Pompano Beach FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CATANZARO, RICH 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600078523816 08/09/06--01034--003 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETIK, GEORGE 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHUMAN, CATHY 600 NE 13TH AVE POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11. If changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angela Peseux ANGELA PESEUX 8/2/06 954-942-3625
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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