

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90274 018 ****62.00

DOCUMENT # N04000001599

1. Entity Name
FORCE OF POMPANO, INC.



Principal Place of Business

**1106 NW 11TH COURT
FORT LAUDERDALE, FL 33311**

Mailing Address

**1106 NW 11TH COURT
FORT LAUDERDALE, FL 33311**

60027333



03302006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0956981

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WOODSON, GLORIA
1106 NW 11TH COURT
FORT LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WOODSON, GLORIA 1106 NW 11TH COURT FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PEETE, DENNIS 1106 NW 11TH COURT FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS TYSON, KIMIKA 10 NW 17TH COURT POMPANO BEACH, FL 33060
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SIMETON, EMMITT III 3000 NW 7TH AVE POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-31-06 (954) 768-9397