

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 13, 2005
Secretary of State**

DOCUMENT# N04000007183

Entity Name: POMPANO BEACH JUNIOR LIFEGUARD ASSOCIATION, INC.

Current Principal Place of Business:

10 NORTH POMPANO BEACH BOULEVARD
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

10 NORTH POMPANO BEACH BOULEVARD
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 56-2476471 FEI Number Applied For () FEI Number Not Applicable () 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:

SCHLEGEL, PAUL
100 WEST CYPRESS CREEK ROAD
SUITE 910
FORT LAUDERDALE, FL 33309 US

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: P () Delete
Name: KERRIGAN, MICHELE
Address: 1311 SE 9TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: P () Delete
Name: VITALE, VALERIE
Address: 2351 NE 27TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: S () Delete
Name: HOFFMAN, SUZANNE
Address: 2101 NE 27TH COURT
City-St-Zip: LIGHTHOUSE POINT, FL

Title: T () Delete
Name: YOUNG, HEIDI
Address: 504 NE 10TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALERIE, VITALE
Address: 2351 NE 27TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: P (X) Change () Addition
Name: GILLESPIE, DENNIS
Address: 2781 NE 5TH STREET
City-St-Zip: POMPANO BEACH, FL 33062

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: VALERIE VITALE

P

07/13/2005

Electronic Signature of Signing Officer or Director

_____ Date