

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04553

FILED
Feb 07, 2009
Secretary of State

Entity Name: THE EXCHANGE CLUB OF POMPANO BEACH, INC.

Current Principal Place of Business:

C/O: WILLIAM F. SULLIVAN
2211 NE 36TH ST #204
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

C/O: WILLIAM F. SULLIVAN
2211 NE 36TH ST #204
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 59-2438569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, WILLIAM F
2211 NE 36TH ST #204
LIGHTHOUSE POINT, FL 33064 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: TD () Delete
Name: WILLIAMS, DAVID TAD
Address: 6550 N FEDERAL HWY #410
City-St-Zip: FT LAUDERDALE, FL 33308

Title: PD () Delete
Name: LAMARCA, CHARLES
Address: 3605 NE 24 ST
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VPD () Delete
Name: LONG, TODD
Address: 4111 NE 30 TERRACE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: SD () Delete
Name: RAMMAN, JOHN
Address: 2850 NE 18TH ST
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: WILLIAMS, DAVID TAD
Address: 6550 N FEDERAL HWY #410
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VPD (X) Change () Addition
Name: DAVIS, JAMES
Address: 2731 N.E. 14TH STREET, #923B
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD (X) Change () Addition
Name: LONG, TODD
Address: 4111 NE 30 TERRACE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: SD (X) Change () Addition
Name: PETRONE, LOUIS
Address: 2650 N.E. 47TH STREET
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: DAVID TAD WILLIAMS

TD

02/07/2009

Electronic Signature of Signing Officer or Director

_____ Date