

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001306

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Entity Name:** POMPANO BEACH OFFSHORE ANGLERS, INC.

**Current Principal Place of Business:**

1010 S.E. 2ND AVENUE  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

1010 S.E. 2ND AVENUE  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GIUNTA & HOUSE, P.A.  
6451 N. FEDERAL HIGHWAY  
806  
FORT LAUDERDALE, FL 33308 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  
Name: SQUADRITO, JEROME  
Address: 1010 S.E. 2ND AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP  
Name: PUGLISI, DON  
Address: 211 SE 10TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

Title: TRES  
Name: PUGLISI, DEBBIE  
Address: 211 S.E. 10TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP  
Name: STABILE, JOHN  
Address: 973 S.E. 9TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP  
Name: GIUNTA, PATRICK B ESQ.  
Address: 6451 N. FEDERAL HIGHWAY 806  
City-St-Zip: POMPANO BEACH, FL 33308

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH PUGLISI

TRES

04/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date