

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N08240

1. Entity Name

POMPANO BEACH 5555 SOCIETY, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90030 044 ****61.25

Principal Place of Business

215 NE 4TH AVENUE
PO BOX 154
POMPANO BEACH FL 33061

Mailing Address

215 NE 4TH AVENUE
PO BOX 154
POMPANO BEACH FL 33061-0154

2. Principal Place of Business

3. Mailing Address

11 NE 17TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

908 BT. BAANTLEY

City & State

City & State

POMPANO BCH FL

Zip

Country

Zip

33060

Country

USA

4. FEI Number

65-0028643

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SENFT, ALBERT T.
629 SW 6TH STREET NE 21
POMPANO BEACH FL 33060

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME DRISCOLL, JOSEPH
STREET ADDRESS 961 S CYPRESS ROAD
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VPD
STREET ADDRESS LYNN, ROBERT
CITY-ST-ZIP 7122 MICHIGAN ISLE RD
LAKE WORTH FL 33467

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME STD
STREET ADDRESS SENFT, ALBERT
CITY-ST-ZIP 629 SW 6TH STREET NE 21
POMPANO BEACH FL 33060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME PD
STREET ADDRESS BRANTLEY, ROBERT
CITY-ST-ZIP 11 NE 17TH AVENUE
POMPANO BEACH FL 33060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS HAUT, GUY
CITY-ST-ZIP 313 NE 11TH AVE
POMPANO BEACH FL 33060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS ROSS, FRANK
CITY-ST-ZIP 600 S. FIG TREE LANE
PLANTATION FL 33317

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 of Albert T. Senft
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-00 (954) 943-8864

Date

Daytime Phone #

CR2E037 (9/99)