

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 30, 2006 8:00 am**  
**Secretary of State**

01-30-2006 90044 033 \*\*\*\*70.00

<b>DOCUMENT # N13087</b>	
1. Entity Name NORTH POMPAÑO BEACH LITTLE LEAGUE, INC.	



Principal Place of Business 4400 NE 18 AVE POMPAÑO BEACH, FL 33064 US	Mailing Address P.O. BOX 5817 LIGHTHOUSE POINT, FL 33074 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01082006 Chg-NP CR2E037 (11/05)

6. Name and Address of Current Registered Agent  MARIANNE, ROBROCK 1721 NE 43 CT POMPAÑO BEACH, FL 33064		7. Name and Address of New Registered Agent Name <u>RITA SHARON WALKER</u> Street Address (P.O. Box Number is Not Acceptable) <u>5114 NE 2nd Way</u> City <u>Pompano Beach</u> FL Zip Code <u>33064</u>	
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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 Rita Sharon Walker  
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBROCK, MARIANNE 1721 NE 43 CT POMPAÑO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P President RITA SHARON WALKER 5114 NE 2nd Way Pompano Bch, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VOSS, RITA 4281 NE 13 AVE POMPAÑO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Secretary SHARON LANDROTH 1050 NE 24th Ave #4 Pompano Bch, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VAUGHN, CINDY 330 NE 44 CT POMPAÑO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Treasurer Kim Denwick 3657 NE 12th Terr Pompano Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STAHMAN, DEBBIE 4321 NE 12 TERRACE POMPAÑO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Vice President Joy HANLEY 3911 NW 3rd Ave Pompano Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Agent KEN WALKER 5114 NE 2nd Way Pompano Bch, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Rita Sharon Walker RITA SHARON WALKER 1/29/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

60008242

**Division of Corporations****Annual Report**

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**Document Number**

N13087

**Business Entity Name**NORTH POMPANO BEACH LITTLE  
LEAGUE, INC.**FEI Number**

592638439

**FEI Number Status****Certificate of Status Desired**

No

**Election Campaign Financing Trust Fund  
Contribution**

No

**Principal Place of Business****Address** 4400 NE 18 AVE**Suite, Apt. #, etc.****City, State** POMPANO BEACH, FL**Zip Code & Country** 33064 US**Mailing Address****Address** P.O. BOX 5817**Suite, Apt. #, etc.****City, State** LIGHTHOUSE POINT, FL**Zip Code & Country** 33074 US**Name and Address of Registered Agent****Name (Last, First, Middle, Title)** RITA, WALKER**Address** 5114 NE 2ND WAY**Suite, Apt. #, etc.****City, State** DEERFIELD BEACH, FL**Zip Code & Country** 33064 US**Registered Agent Signature** RITA SHARON WALKER**Officer/Director Name and Address****Title** PD**Name (Last, First, Middle, Title)** WALKER, RITA , S**Street Address** 5114 NE 2ND WAY

Division of Corporations

ATTACHMENT  
60008242

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City, State DEERFIELD BEACH, FL  
Zip Code & Country 33064

#N13087

Title SD  
Name (Last, First, Middle, Title) LANDRETH, SHERRY  
Street Address 1080 NE 24TH AVE #4  
City, State POMPAÑO BEACH, FL  
Zip Code & Country 33064

Title VD  
Name (Last, First, Middle, Title) HAWKINS, JAY  
Street Address 3911 NW 3RD AVE  
City, State POMPAÑO BEACH, FL  
Zip Code & Country 33064

Title TD  
Name (Last, First, Middle, Title) DENMARK, KIM  
Street Address 3651 NE 12TH TERRACE  
City, State POMPAÑO BEACH, FL  
Zip Code & Country 33064

Title PD  
Officer/Director Signature RITA SHARON WALKER

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