

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90049 007 ****61.25

DOCUMENT # N50089 1. Entity Name THE POMPANO BEACH WOMAN'S CLUB, INC.					
Principal Place of Business 314 NE 2 ST POMPANO BEACH, FL 33060			Mailing Address 314 NE 2 ST POMPANO BEACH, FL 33060		
2. Principal Place of Business State, Apt. #, etc.		3. Mailing Address State, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MOTZNER, ANNA 931 NE 25TH AVE POMPANO BEACH, FL 33062			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Anna Motzner</u> 3/28/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when vacating)					
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
(Make check payable to Florida Department of State)					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, WRAY 531 N OCEAN BLVD APT 1203 POMPANO BEACH, FL 33062 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOTZNER, ANNA 931 NE 25 AVENUE POMPANO BEACH, FL 33062 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FSD CAMPBELL, MARIE 4920 NE 51 CT APT 107 FORT LAUDERDALE, FL 33308 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	FINANCIAL SECT. HAZEL ARMBRISTER ☐ Change ☐ Addition 1808 NW 6TH AVE. POMPANO Bch., FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS FIELDS, JAN 2744 NE 30TH AVE LIGHTHOUSE PT, FL 33064 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP RAINEY, REBECCA 429 NE 25 AVE POMPANO BEACH, FL 33062 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Anna Motzner</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					