

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002573

FILED
Jan 31, 2012
Secretary of State

Entity Name: EXCHANGE CLUB OF POMPANO BEACH CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

C/O: WILLIAM F. SULLIVAN
2211 N.E. 36TH STREET, #204
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

C/O: WILLIAM F. SULLIVAN
2211 N.E. 36TH STREET, #204
LIGHTHOUSE, FL 33064

New Mailing Address:

FEI Number: 65-0416426 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SULLIVAN, WILLIAM F
2211 N.E. 36TH STREET, #204
LIGHTHOUSE, 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
Name: WILLIAMS, DAVID TAD
Address: 6550 N FEDERAL HWY #410
City-St-Zip: FT LAUDERDALE, FL 33308

Title: SD
Name: RASK, BRIAN
Address: 2701 N.E. 14TH STREET, #2
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD
Name: ALFORD, SCOTT
Address: 2648 N.E. 27TH COURT
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VD
Name: FRIEDMAN, ROBERT
Address: 2010 N.E. 31ST STREET
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: DAVID TAD WILLIAMS

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01/31/2012

Electronic Signature of Signing Officer or Director

Date