

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002065

1. Entity Name

FPOM, INC.

Principal Place of Business

515 E. LAS OLAS BLVD., SUITE 1500
FORT LAUDERDALE FL 33301

Mailing Address

515 E. LAS OLAS BLVD., SUITE 1500
FORT LAUDERDALE FL 33301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0501544

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

BROGAN, FRANCIS B JR.
515 E. LAS OLAS BLVD., SUITE 1500
FORT LAUDERDALE FL 33301

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	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	PD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	BIENES, MICHAEL S	141 BAY COLONY DRIVE	FORT LAUDERDALE FL 33308						
	D			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	BROGAN, FRANCIS B JR.	515 E. LAS OLAS BLVD., SUITE 1500	FORT LAUDERDALE FL 33301						
	D			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	CARONE, MATTHEW	904 N. RIO VISTA BLVD.	FORT LAUDERDALE FL 33301						
	D			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	JUDD, JAMES	2421 BARCELONA DRIVE	FORT LAUDERDALE FL 33301						
	D			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	KAHN, DONALD	GROVESNOR HOUSE	LONDON, ENGLAND						
	ST			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	BIENES, DIANNE K	141 BAY COLONY DRIVE	FORT LAUDERDALE FL 33308						

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90140 027 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)