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**NONPROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Murray
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N95000002416 (4)

1. Corporation Name

I'M A GOOD CITIZEN OF POMPANO BEACH, INC.

Principal Place of Business

Mailing Address

310 N.E. 6TH STREET
POMPANO BEACH FL 33060

310 N.E. 6TH STREET
POMPANO BEACH FL 33060

REINSTATEMENT

3. Date incorporated or qualified
05/19/1995

3a. Date of first meeting

2. Principal Place of Business

2a. Mailing Address

21

2a

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HURLEY, SUSAN T
310 N.E. 6TH STREET
POMPANO BEACH FL 33060**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Susan T. Hurley

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

(NOTE: Registered Agent signature required when reappointing) (25-26-2000) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	OKER, SUSAN N	
STREET ADDRESS	2735 N.E. 28TH COURT	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	
TITLE	VD	☐ DELETE
NAME	LINGQUIST, BARRY	
STREET ADDRESS	100 S.W. 3RD STREET	
CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	SD	☐ DELETE
NAME	HURLEY, SUSAN T	
STREET ADDRESS	310 N.E. 6TH STREET	
CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	T	☐ DELETE
NAME	MILLS, ROBERT A	
STREET ADDRESS	310 N.E. 6TH STREET	
CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Susan T. Hurley* **SIGNATURE REQUIRED**

9/6/96

954-788-7778

CR2E037 (12/96)