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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000003538

1. Corporation Name

CHILDREN IN THE ARTS OF POMPANO BEACH, INC.

Principal Place of Business

1500-A EAST ATLANTIC BLVD.
 POMPANO BEACH FL 33060

Mailing Address

1500-A EAST ATLANTIC BLVD.
 POMPANO BEACH FL 33060



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

06/19/1997

4. FEI Number

65-0772750

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SIREN, ANNE
1500-A EAST ATLANTIC BLVD.
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
 NAME BRAVERMAN, NATHAN M
 STREET ADDRESS 1370 S. OCEAN BLVD., #1704
 CITY-ST-ZIP POMPANO BEACH FL 33062

☐ DELETE

TITLE VPD
 NAME FURMAN, FRANK
 STREET ADDRESS 1314 E. ATLANTIC BLVD.
 CITY-ST-ZIP POMPANO BEACH FL 33060

☐ DELETE

TITLE SD
 NAME GRIFFIN, ARLYNE J
 STREET ADDRESS 300 NE 7TH AVE
 CITY-ST-ZIP POMPANO BEACH FL 33061

☐ DELETE

TITLE TD
 NAME EVERETT, DOUG
 STREET ADDRESS 2200 E. ATLANTIC BLVD.
 CITY-ST-ZIP POMPANO BEACH FL 33062

☐ DELETE

TITLE D
 NAME SIREN, ANNE
 STREET ADDRESS 1500-A EAST ATLANTIC BLVD.
 CITY-ST-ZIP POMPANO BEACH FL 33060

☐ DELETE

TITLE D
 NAME BAMMAN, FRED C III
 STREET ADDRESS 2189 S.E. 9TH ST
 CITY-ST-ZIP POMPANO BEACH FL 33062

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 ☐ Change ☐ Addition

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

14. 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 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, with all other like empowered.

SIGNATURE: *Douglas M. Everett*

4-13-99 954-941-2940

CR2E037 (1/98)