

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000073502

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** PAM HUIZENGA ENTERPRISES, INC.

**Current Principal Place of Business:**

515 SW 1 AVE  
FT LAUDERDALE, FL 33301 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 SW 1 AVENUE  
FT LAUDERDALE, FL 33301 US

**New Mailing Address:**

**FEI Number:** 65-0709231      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOLFER, ROBIN  
515 SW 1 AVENUE  
FT. LAUDERDALE, FL 33301 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ALEXANDER, PAM  
**Address:** 515 SW 1 AVE  
**City-St-Zip:** FT. LAUDERDALE, FL 33301

**Title:** VP  
**Name:** WOLFER, ROBIN  
**Address:** 2980 SW 86 WAY  
**City-St-Zip:** DAVIE, FL 33314

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ROBIN WOLFER

VP

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date