2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 365975

FILED Jan 13, 2006 Secretary of State

Entity Name: POMPANO SENIOR SQUADRON FLYING CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 1950 N.E. 6 STREET P.O. BOX 1762 POMPANO BEACH, FL 33060 **New Mailing Address: Current Mailing Address:** 1950 N.E. 6 STREET P.O. BOX 1762 POMPANO BEACH, FL 33060 FEI Number: 59-1416663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MELLGREN, LAURENCE 5400 N OCEAN BLVD #32 US FT. LAUDERDALE, FL 33308 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MELLGREN, LAURENCE P,D MELLGREN, LAURENCE Name: Name: 5400 N. OCEAN BLVD 5400 N. OCEAN BLVD, #32 Address: Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: FT. LAUDERDALE, FL 33308 Title: (X) Change () Addition Title: () Delete Name: CHALFANT, CHRISTOPHER D.T.D. Name: CHALFANT, CHRISTOPHER D 608 SW 8TH TERRACE 608 SW 8TH TERRACE Address: Address: FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33315 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete VP D WATKINS, DAVID VP,D WATKINS, DAVID Name: Name: 3240 LAKESHORE DR. 3240 LAKESHORE DR. Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442 Title: () Delete Title: S,D (X) Change () Addition MORRIS, JEFFERY S,D MORRIS, JEFFERY Name: Name: Address: 1977 NW 29TH RD. Address: 1977 NW 29TH RD. City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33431 Title: Title: () Delete () Change (X) Addition Name: Name: FARNELL, JOHN Address: Address: 1051 SE 7TH AVE POMPANO BEACH, FL 33060 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER D. CHALFANT T,D 01/13/2006