

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000008744

**Entity Name:** POMPANO CHIEFS CHEER AND FOOTBALL PROGRAM INC

**Current Principal Place of Business:**

901 NW 10 TH STREET  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

901 NW 10 TH STREET  
POMPANO BEACH, FL 33060 US

**FEI Number:** 03-0480329

**Certificate of Status Desired:** No

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

BROWN, DEMETRIUS  
230 NW 20TH STREET  
POMPANO BEACH, FL 33060 US

*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

**Officer/Director Detail :**

Title P  
Name BROWN, DEMETRIUS  
Address 230 NW 20TH STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title VP  
Name MCINTOSH, EDWARD  
Address 204 NW 15TH COURT  
City-State-Zip: POMPANO FL 33060

Title SEC  
Name MCGIRT, CONNIE  
Address 149 NW 14TH STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title OFFICER  
Name PROPHETE, CHRISTINE  
Address 901 NW 10 TH STREET  
City-State-Zip: POMPANO BEACH FL 33060

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

**SIGNATURE:** DEMETRIUS J BROWN

**PRESIDENT**

**03/21/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date