



# CITY OF POMPANO BEACH ADVISORY BOARD / COMMITTEE APPLICATION

City Clerk's Office Phone: 954-786-4611 Fax: 954-786-4095  
Post Office Drawer 1300, Pompano Beach, FL 33061  
www.mypompanobeach.org

Mr. ☒ Mrs. \_\_\_\_\_ Ms. \_\_\_\_\_ Miss \_\_\_\_\_ Name: HARRY DIAMOND  
(Optional)

### Residence Information:

Home Address: 410 SE 5th Street  
City/State/Zip: POMPANO BEACH, FL 33060  
Home Phone: 954-545-5141 Cell Phone: 802-688-3909  
Email: APPLEBARNHARRY@gmail.com Fax: \_\_\_\_\_

### Business Information:

Employer/Business Name: VALOR VENTURES  
Current Position / Occupation: PRESIDENT  
Business Address: 3313 SE 30th St  
City/State/Zip: POMPANO BEACH FL 33062  
Business Phone: 954-545-5141 Fax: \_\_\_\_\_ Email: VALORVENTURESINC@gmail.com

Are you a U.S. Citizen? Yes ☒ No \_\_\_\_\_

Are you a resident of Pompano Beach? Yes ☒ No \_\_\_\_\_ Reside in District: 1 2 3 4 5

Do you own real property in Pompano Beach? Yes \_\_\_\_\_ No ☒

Are you a registered voter? Yes ☒ No \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No ☒

Current or prior service on governmental boards and/or committees: \_\_\_\_\_

Please make a check next to the Advisory Boards/Committees you would like to serve on:

<input type="checkbox"/> Affordable Housing	<input type="checkbox"/> Cultural Arts	<input type="checkbox"/> Parks and Recreation
<input type="checkbox"/> Air Park	<input type="checkbox"/> Education	<input type="checkbox"/> *Planning & Zoning/Local Planning Agency
<input type="checkbox"/> Architectural Appearance	<input checked="" type="checkbox"/> Emergency Medical Services	<input type="checkbox"/> *Police & Firefighter's Retirement System
<input type="checkbox"/> Budget Review	<input type="checkbox"/> *Employee's Board of Appeals	<input type="checkbox"/> Pompano Beach Economic Development Council
<input type="checkbox"/> Charter Amendment	<input type="checkbox"/> Employee's Health Insurance	<input type="checkbox"/> Recycling & Solid Waste
<input type="checkbox"/> Community Appearance	<input type="checkbox"/> *General Employee's Retirement System	<input type="checkbox"/> Sand & Spurs Riding Stables
<input type="checkbox"/> *Community Development	<input type="checkbox"/> Golf	<input type="checkbox"/> Marine
<input type="checkbox"/> CRA East	<input type="checkbox"/> Historic Preservation	<input type="checkbox"/> *Unsafe Structures
<input type="checkbox"/> CRA West	<input type="checkbox"/> *Housing Authority of Pompano Beach	<input type="checkbox"/> *Zoning Board of Appeals

\*Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.

In addition a Resume may be attached

Education: BACHELOR OF TECHNOLOGY AT NEW YORK INSTITUTE OF TECHNOLOGY

FIRST AID, AED, CPR, CELLULAR CLEANSING + NUTRITIONAL HEALTH

Experience: CURRENT CERT STEERING COMMITTEE MEMBER AND ZONE CAPTAIN

FIRST AID, AED, CPR, EXECUTIVE TRAINER, NUTRITIONAL HEALTH COACH,

MASTER CELLULAR CLEANSING COACH

Past Positions: EXECUTIVE AT ENGINEERING + MANUFACTURING Co.

OWNER + OPERATOR OF A VERMONT FARM MARKET, APPLE ORCHARD, BAKERY, AGRITOURISM

CENTER, GUEST BAKER FOR NBC NEWS.

Hobbies: SCUBA DIVING, TRAVEL, COOKING, BAKING, HIKING,

**Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.**

Signature: Helen Diamond

Date: 5/22/12

Initials of Clerk or Deputy: HJ

Date received or confirmed: July 2016

Please check one: ☒ New Application ☐ Currently Serving on Board ☐ Updated Information

Note: Application is effective for one year from date of completion. If you have any questions on the above, please call the City Clerk's Office at: 954-786-4611, or send via fax to: 954-786-4095.

## ADVISORY BOARD / COMMITTEE

City

Clerk's Office

Phone: 954-786-4611 Fax: 954-786-4095

Post Office Drawer 1300, Pompano Beach, FL 33061

www.mypompanobeach.org

Mr. \_\_\_ Mrs. \_\_\_ Ms. ☒ Miss \_\_\_ Name MICHELLE RHOULHAC  
(Optional)**Residence Information:**Home Address: 3021 NE 1<sup>ST</sup> AVE

City/State/Zip: POMPANO BEACH, FLORIDA 33064

Home Phone: 954-592-9492

Cell \_\_\_ Phone: \_\_\_

Email: NOTHINGBUTBIZ@YAHOO.COM

Fax: 954-941-1321

**Business Information:**

Employer/Business Name: BROWARD COUNTY SCHOOL BOARD

Current Position / Occupation SUBSTITUTE TEACHER

Business Address: 7720 W OAKLAND PARK BLVD

City/State/Zip: SUNRISE FLORIDA

Business Phone: \_\_\_ Fax: \_\_\_ Email: \_\_\_

Are you a U.S. Citizen? Yes ☒ No \_\_\_Are you a resident of Pompano Beach? Yes ☒ No \_\_\_  
5 \_\_\_Reside in District: 1 \_\_\_ 2 ☒ 3 \_\_\_ 4 \_\_\_Do you own real property in Pompano Beach? Yes ☒ No \_\_\_Are you a registered voter? Yes ☒ No \_\_\_Have you ever been convicted of a felony? Yes \_\_\_ No ☒ \_\_\_

Current or prior service on governmental boards and/or committees: COMMUNITY APPREARANCE

Please make a check next to the Advisory Boards/Committees you would like to serve on:

<input checked="" type="checkbox"/> Affordable Housing	<input checked="" type="checkbox"/> Cultural Arts	<input checked="" type="checkbox"/> Parks and Recreation
<input checked="" type="checkbox"/> Air Park	<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> *Planning & Zoning/Local Planning Agency
<input checked="" type="checkbox"/> Architectural Appearance	<input checked="" type="checkbox"/> Emergency Medical Services	<input checked="" type="checkbox"/> *Police & Firefighter's Retirement System
<input checked="" type="checkbox"/> Budget Review	<input checked="" type="checkbox"/> *Employee's Board of Appeals	<input checked="" type="checkbox"/> Pompano Beach Economic Development Council



In addition a Resume may be attached

Education: Florida A & M University and Broward College.

Experience: Tax Advisor, Paralegal Certificate, Substitute Teacher and Cosmetologist

Past Positions: Community Appearance Board

Hobbies: Reading, traveling and sporting events

**Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.**

Signature: Michelle Rhoulhas

Date: 11/24/10

Initials of Clerk or Deputy: MS  
11/29/10

Date received or confirmed:

Please check one: ☒ New Application ☐ Currently Serving on Board ☒ Updated Information

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**CITY OF POMPANO BEACH  
ADVISORY BOARD / COMMITTEE  
APPLICATION**

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Post Office Drawer 1300, Pompano Beach, FL 33061  
[www.mypompanobeach.org](http://www.mypompanobeach.org)

Mr. X Mrs. \_\_\_ Ms. \_\_\_ Miss \_\_\_ Name: PREDRAG PATRICK JOVANOVIĆ  
(Optional)

**Residence Information:**

Home Address: 411 N.E. 18th AVENUE  
City/State/Zip: POMPANO BEACH FL 33060  
Home Phone: 954.785.6100 Cell Phone: 954.240.8334  
Email: FLPATRICK@YAHOO.COM Fax: \_\_\_\_\_

**Business Information:**

Employer/Business Name: FLORIDA ATLANTIC UNIV. OFFICE OF EXECUTIVE PROG.  
Current Position / Occupation: STUDENT - PROJECT MANAGEMENT  
Business Address: 777 GULF ROAD, BLDG. 93, SUITE 201  
City/State/Zip: BOCA RATON FL 33431  
Business Phone: 954.297.2179 Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
FAU EXECUTIVE PROGRAMS.COM

Are you a U.S. Citizen? Yes X No \_\_\_

Are you a resident of Pompano Beach? Yes X No \_\_\_ Reside in District: 1 \_\_\_ 2 \_\_\_ 3X 4 \_\_\_ 5 \_\_\_

Do you own real property in Pompano Beach? Yes X No \_\_\_ COMM. REX HARDIN

Are you a registered voter? Yes X No \_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No X

Current or prior service on governmental boards and/or committees: POMPANO F.D. CERT

**Please make a check next to the Advisory Boards/Committees you would like to serve on:**

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<input type="checkbox"/> Air Park	<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> *Planning & Zoning/Local Planning Agency
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<input checked="" type="checkbox"/> Budget Review	<input type="checkbox"/> *Employee's Board of Appeals	<input type="checkbox"/> Pompano Beach Economic Development Council
<input type="checkbox"/> Charter Amendment	<input type="checkbox"/> Employee's Health Insurance	<input type="checkbox"/> Recycling & Solid Waste
<input type="checkbox"/> Community Appearance	<input type="checkbox"/> *General Employee's Retirement System	<input type="checkbox"/> Sand & Spurs Riding Stables
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**\*Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.**

In addition a Resume may be attached

Education: POMPANO BEACH SR. HIGH SCHOOL 1977  
FLORIDA ATLANTIC UNIV. BBA 1982  
FLORIDA INTL. UNIV. GRAD. COURSES 1983

Experience: MANAGEMENT, AUTOMOTIVE, CONSTRUCTION,  
TOURISM,

Past Positions: \_\_\_\_\_

Hobbies: INTERESTS: CHILDRENS SPORTS, CHILDRENS ISSUES,  
POMPANO F.D. CERT, ECONOMIC DEVELOPMENT

**Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.**

Signature: 

Date: 26 JAN 2011

Initials of Clerk or Deputy: \_\_\_\_\_

Date received or confirmed: \_\_\_\_\_

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No Response  
1-26-11

**CITY OF POMPANO BEACH, FL  
ADVISORY BOARD/COMMITTEE APPLICATION**

City Clerk's Office  
Post Office Drawer 1300  
Pompano Beach, Florida 33061

Fax No.: (954) 786-4095

Phone No.: (954) 786-4611

IN ORDER TO ASSIST THE CITY COMMISSION IN MAKING MUNICIPAL BOARD AND COMMITTEE APPOINTMENTS, THE FOLLOWING INFORMATION IS REQUESTED:

NAME OF BOARD/COMMITTEE: Community Development

NAME OF APPLICANT: Emma Ellington

RESIDENCY ADDRESS: 137 NW 15th St

ZIP CODE: 33060 HOME PHONE NO.: 954 781 8537

MAILING ADDRESS: 137 NW 15th St

CITY/STATE/ZIP CODE: Pompano B. Fla 33060

ARE YOU A CITY RESIDENT? YES: ☒ NO: ☐

IF YES, PLEASE INDICATE DISTRICT YOU RESIDE IN: 1: ☐ 2: ☐ 3: ☐ 4: ☒ 5: ☐

DO YOU OWN REAL PROPERTY IN POMPANO BEACH? YES: ☒ NO: ☐

ARE YOU A REGISTERED VOTER? YES: ☒ NO: ☐

BUSINESS OR OCCUPATION: Retired Nurse And Educator

BUSINESS ADDRESS: Property owner  
137 NW 15th St

CITY/STATE: Pompano B. Florida

ZIP CODE: 33060 BUSINESS PHONE NO. 954 781 8537

ARE YOU PRESENTLY SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? No

IF YES, PLEASE LIST NAME: \_\_\_\_\_

\_\_\_\_\_

WOULD YOU CONSIDER SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? yes

IF YES, PLEASE LIST NAME:

Zoning  
Budget

Fire Rescue (EMS)

HAVE YOU EVER SERVED ON A CITY OF POMPANO BEACH BOARD/COMMITTEE? NO

IF YES, PLEASE STATE NAME OF BOARD OR COMMITTEE: \_\_\_\_\_

PLEASE LIST THE FOLLOWING BACKGROUND INFORMATION WHICH WOULD QUALIFY YOU TO SERVE ON THIS BOARD OR COMMITTEE:

EDUCATION: High School Diploma, Licensed Nurse,  
Land Lord, Case Manager, Degree in Education

EXPERIENCE: Working Working to the Elderly, Section  
Homeless,

CURRENT POSITION: (Retired) Consultant for  
the Homeless

PAST POSITIONS: Teacher, Counselor, Nurse, Case manager

HOBBIES: Sewing, dancing, Lecturing

MAKING ANY FALSE STATEMENTS HEREIN MAY BE CAUSE FOR REMOVAL BY THE CITY COMMISSION:

Emmanuel E. Ford  
SIGNATURE OF APPLICANT

1/24/04  
DATE OF APPLICATION

[Signature]  
INITIALS OF CLERK OR DEPUTY

1/24/04  
DATE RECEIVED OR CONFIRMED

\*\*\*\*\*

NOTE: IF YOU DO NOT WISH TO SERVE ON THIS BOARD OR COMMITTEE, PLEASE EITHER CHECK HERE \_\_\_\_\_ AND RETURN TO CITY CLERK, OR NOTIFY THE CITY CLERK'S OFFICE IN WRITING OF YOUR DESIRE NOT TO SERVE.

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THIS SECTION MUST BE COMPLETED BY THE ADVISORY BOARD SECRETARY ONLY

NUMBER OF MEETINGS HELD: \_\_\_\_\_ NUMBER OF MEETINGS ATTENDED: \_\_\_\_\_