2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 8:00 am
Secretary of State
03-12-2008 90036 043 ***150.00

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1. Entity Name
2570 CORPORATION

Principal Place of Business	Mailing Address
2570 SOUTH FEDERAL HIGHWAY PALM BEACH, FL 33435	2570 SOUTH FEDERAL HIGHWAY PALM BEACH, FL 33435

40043958

01292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1161606
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SIRIANNI, JOSEPH V
2570 SO. FEDERAL HWY #7
BOYNTON BCH, FL 33435

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	TUTTLE, JOHN
STREET ADDRESS	2570 S. FEDERAL HWY, #2
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	P
NAME	PAFENBACH, BETTY
STREET ADDRESS	2570 S. FEDERAL HWY., #12
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	AT
NAME	SIRANNI, JOSEPH
STREET ADDRESS	2570 S. FEDERAL HWY. #7
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	T
NAME	BETLEY, MARY-ANN
STREET ADDRESS	2570 S. FEDERAL HWY. #10
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	S
NAME	TUTTLE, ALICE
STREET ADDRESS	2570 S. FEDERAL HWY. #2
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	V
NAME	CARVER, RITA Delete
STREET ADDRESS	2570 S. FEDERAL HWY. #4
CITY-ST-ZIP	BOYNTON BEACH, FL 33435

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty S. Pafenbach 3-3-2008 561-737-1169
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #