2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 8:00 am
Secretary of State
02-05-2007 90099 005 ****61.25

DOCUMENT # 702539

1. Entity Name

CHURCH OF THE PALMS CONGREGATIONAL INC

Principal Place of Business	Mailing Address
1960 NORTH SWINTON AVENUE DELRAY BCH. FL 33444-4328	1960 NORTH SWINTON AVENUE DELRAY BCH. FL 33444-4328

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6135858 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MILLER, ARNOLD
7082 NW 3RD AVE.
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name: Fred Rosene
Street Address (P.O. Box Number is Not Acceptable): 907 S.W. 37th Court
City: Boynton Beach **FL** Zip Code: 33435

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

FILE NOW: FEE IS $61.25
Due By May 1, 2007

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D SMITH, HENRIETTA M 1202 NW 2ND ST DELRAY BEACH FL 33444	☐ Delete	Treasurer Todd Gurne 518 N. Federal Hwy # 12 Lake Worth, Fl 33435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	T CARLE, PATRICK 9688 PAVAROTTI TERRACE # 102 BOYNTON BEACH FL 33437	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D SHERWIN, MARGUERITE 55 SEVENTH AVE. #F DELRAY BEACH FL 33483	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: A Frederick Rosene
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #