2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMI 1. Entity Name PALM TOWN							
Principal Place of 2200 MONROE ST. HOLLYWOOD FL 33		Mailing Address 2200 MONROE ST. BOX 36 HOLLYWOOD FL 33020		 			
2. Principal Place of Business		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, e	tc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State		City & State	City & State				
Zip	Country	Zip	Country	5. Certificate of S			
	6. Name and Address of Cu	rrent Registered Agent		7. Name and Ad			
	<u>—</u>		Name				

FILED Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90434 029 ****70.00

					1 600 WE	TE ST						
Principal Place of Business 200 MONROE ST. OLLYWOOD FL 33020-2357		2200 M BOX 36	Mailing Address 2200 MONROE ST. BOX 36 HOLLYWOOD FL 33020				7 					
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State		Cit	City & State		·		4. FEI Number 59-6528068			Applied For Not Applicable		
Zip Country			Zip Cour							8.75 Add	itional	
6. Name and Address of Current Registered Agent			L ਵਾਲੇ			7. Name and Address of New Registered Agent						
	O. Italiio and Address of C	Janone Hogistore			Name							
ROYAL PR	operty Management In Laporta	IC			Street Ac	ddress (f	P.O. Box Number is	Not Acceptabl	e)			
	LANTIC BLVD RINGS FL 33071				City					Zip Code		
					,				FL			
3. The above r	named entity submits this state	ement for the purp	oose of changing its	registere	ed office or	register	ed agent, or both,	in the State of F	lorida. I am fa	miliar with,	and accept	
the obligation	ons of registered agent.											
					•							
SIGNATURE _	Signature, typed or printed name of registe	ared acent and title if an	nlicable (NOT	E: Registere	d Agent signatu	re required	when reinstating)	1.	DATE			
	Signature, typed or printed have or region											
. F	ILE NOW: FEE IS \$61.2	25	9. Election Ca Trust Fund (\$5.00 May Be Added to Fees		ake Check ida Departi			
10.	OFFICERS.	AND DIRECTORS	<u></u>	11.			ADDITIONS/CHAN	IGES TO OFFIC	ERS AND DIR	ECTORS IN	10]_
	PD		☐ Delete	TITL				<u>. </u>		☐ Change	☐ Addition	103
NAME '	WILLIAMS, ANGEL M		_ 00.00	NAM	E							5
STREET ADDRESS	2200 MONROE ST # 8			STRE	ET ADDRESS							100
CITY-ST-ZIP	HOLLYWOOD FL 33020			CITY	-ST-ZIP		<u>,,,,</u>	<u> </u>				ì
IIILC I	סד		☐ Delete	TITL	E					Change	Addition	5
	HUTTON, DEANNA			NAM	-							Ì
	2200 MONROE ST # 22				ET ADDRESS							
	HOLLYWOOD FL 33020			- CITY	-ST-ZIP	-				Change	L Addition	1
	VSD CALLOWAY, JEAN		Delete	TITL		VSD		_		Change	Addition Addition	
TATALE .	2200 MONROE ST #27			NAM	ET ADDRESS		LAWAY, W					Ì
•	HOLLYWOOD FL 33020				-ST-ZIP		0 MONROE	• • • • • • • • • • • • • • • • • • • •				ļ
CITY-ST-ZIP	D D		107) n	TITL		HOL	LYWOOD F	L 33020		Change	Addition	1
TITLE	WALLACE, KIMBERLY A		Delete	NAM								
	2200 MONROE ST # 17				EET ADDRESS							Ì
	HOLLYWOOD FL 33020			CITY	'-ST-ZIP						<u>.</u>	
TITLE	D		☐ Delete	TITL	E		<u> </u>			☐ Change	Addition	
NAME	PERLOW, STEPHEN A			NAN	1E							{
STREET ADDRESS	2200 MONROE ST # 30	•		STR	EET ADDRESS	ļ						
CITY-ST-ZIP	HOLLYWOOD FL 33020			CITY	/-ST-ZIP							\downarrow
TITLE			Delete	TITL		D	-			☐ Change	X Addition	
NAME	li			NAM			GGS, RIC					
STREET ADDRESS					EET ADDRESS		0 MONROE					
CITY-ST-ZIP			a does not qualify f		/-ST-ZIP	THOF	LYWOOD F	L 33020	a I further ser	lifu that the	information	\dashv
40 15	and to all a state information of the	aliad with this filia	a doge not auglify f	or the exc	emotion sta	ited in Si	ection 119.07(3)(i).	riorida Statute:	s. ciurmer cer	my mat me	mornation	1

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes: I further betting that it is lining 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:

JAN 2003

954-927-2621