

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90031 021 ****61.25

DOCUMENT # 734430 1. Entity Name THE PALM YACHT & BEACH CLUB, INC.																																																																																																																																																					
Principal Place of Business 1438 S OCEAN BLVD LAUDERDALE BY THE SEA, FL 33062			Mailing Address 1438 S OCEAN BLVD LAUDERDALE BY THE SEA, FL 33062																																																																																																																																																		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address																																																																																																																																																		
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																																																																		
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4. FEI Number 59-0822435				Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent O'CONNOR, DANIEL P. J. 200 E. LAS OLAS BLVD., STE 1900 FT. LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																																	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																																	
Make check payable to: Florida Department of State																																																																																																																																																					
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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 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 and empowered.																																																																																																																																																					
SIGNATURE: <u><i>H. E. Overton</i></u> Jan. 29, 08 954 942-7975 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																					