

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735321

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: FORUM CLUB OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

PO BOX 16957  
W. PALM BCH., FL 33416

**New Principal Place of Business:**

4213 HICKORY DR.  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

PO BOX 16957  
W. PALM BCH., FL 33416

**New Mailing Address:**

4213 HICKORY DR.  
PALM BEACH GARDENS, FL 33418

FEI Number: 59-1701100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KRIELOW, GARY R  
500 UNIVERSITY BLVD.  
215  
JUPITER, FL 33458 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: KRIELOW, GARY R  
Address: 500 UNIVERSITY BLVD., #215  
City-St-Zip: JUPITER, FL 33458

Title: P ( ) Delete  
Name: GALLON, DENNIS  
Address: 4200 CONGRESS AVE.  
City-St-Zip: LAKE WORTH, FL 33461

Title: VP ( ) Delete  
Name: COOK, REBEL  
Address: 4521 PGA BLVD #282  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S ( ) Delete  
Name: MALEFATTO, ALFRED J  
Address: 777 SOUTH FLAGLER DRIVE, EAST TOWER  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: RUSSELL, JOYCE  
Address: 3330 FOREST HILL BLVD B-101  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D ( ) Delete  
Name: BONE, BILL  
Address: 550 S QUADRILLE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY KRIELOW

TREA

01/17/2007

Electronic Signature of Signing Officer or Director

Date