

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743462

FILED
Feb 13, 2006
Secretary of State

Entity Name: PALM BEACH COUNTY CULTURAL COUNCIL, INC.

Current Principal Place of Business:

1555 PALM BEACH LAKES BLVD
#300
WEST PALM BEACH, FL 334012328 US

New Principal Place of Business:

Current Mailing Address:

1555 PALM BEACH LAKES BLVD
#300
WEST PALM BEACH, FL 334012328 US

New Mailing Address:

FEI Number: 59-1862336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLADES, RENA M
1555 PALM BEACH LAKES BLVD
#300
WEST PALM BEACH, FL 334012328 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: CEO () Delete
Name: BLADES, RENA M
Address: 1555 PALM BEACH LAKES BLVD, STE 300
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: CD () Delete
Name: BATMASIAN, MARTA T
Address: 215 N FEDERAL HWY, SUITE #3
City-St-Zip: BOCA RATON, FL 33432 US

Title: VCD () Delete
Name: WECHSLER, ROBERT K
Address: 3605 SOUTH OCEAN BOULEVARD
City-St-Zip: PALM BEACH, FL 33480 US

Title: TD () Delete
Name: ELMORE, DEBRA
Address: 777 EAST ATLANTIC AVENUE, STE. C2-#291
City-St-Zip: DELRAY BEACH, FL 334835360 US

Title: SD () Delete
Name: FITERMAN, SHIRLEY
Address: 229 VIA LAS BRISAS
City-St-Zip: PALM BEACH, FL 33480 US

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:

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: RENA M. BLADES

CEO

02/13/2006

Electronic Signature of Signing Officer or Director

Date