

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 21, 2006
Secretary of State

DOCUMENT# 761719

Entity Name: BUSINESS DEVELOPMENT BOARD OF PALM BEACH COUNTY, INC.**Current Principal Place of Business:**310 EVERNIA ST
PALM BEACH GARDENS, FL 33410 US**New Principal Place of Business:****Current Mailing Address:**310 EVERNIA ST
PALM BEACH GARDENS, FL 33410 US**New Mailing Address:****FEI Number:** 59-2169828**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMALLRIDGE, KELLY
310 EVERNIA ST.
WEST PALM BEACH, FL 33401 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:** C () Delete
Name: RUTHERFORD, CHARLES
Address: 2600 NORTH MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33431**Title:** T () Delete
Name: OSBORNE, BUD
Address: 1801 NORTH MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33431**Title:** VC () Delete
Name: ELMORE, GEORGE
Address: 2101 SOUTH CONGRESS AVE
City-St-Zip: DELRAY BEACH, FL 33445**Title:** S () Delete
Name: ARMANDO, TABERNILLA
Address: 1 NORTH CLEMATIS ST #200
City-St-Zip: WEST PALM BEACH, FL 33401**Title:** () Delete
Name:
Address:
City-St-Zip:**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:** P () Change (X) Addition
Name: SMALLRIDGE, KELLY
Address: 310 EVERNIS ST
City-St-Zip: WEST PALM BEACH, FL 33401

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: KELLY SMALLRIDGE

P

04/21/2006

Electronic Signature of Signing Officer or Director

Date