

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2007
Secretary of State

DOCUMENT# N00000006731

Entity Name: THE SOVEREIGN ORDER OF ST. JOHN OF JERUSALEM, KNIGHTS HOSPITALLER, COMMANDERY OF THE PALM BEACHES FOUNDATION, INC.

Current Principal Place of Business:

505 S. FLAGLER DR., STE. 1100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

2811 VILLAGE BLVD
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-1059871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 S. FLAGLER DR., STE. 1100
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: T () Delete
Name: HENRY, THORNTON M
Address: 3028 WASHINGTON RD.
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T () Delete
Name: CHRISTOPHER, BOHLMAN
Address: 771 NE 72ND ST
City-St-Zip: BOCA RATON, FL 33487

Title: TP () Delete
Name: SCHULTZ, GREGORY W
Address: 8853 VIA GRANDE EAST
City-St-Zip: WELLINGTON, FL 33411

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILLIAMS, JOSEPH P JR
Address: 6660 N. W. 84TH AVE.
City-St-Zip: PARKLAND, FL 33067

Title: VP (X) Change () Addition
Name: SCHOECH, CHARLES
Address: 14058 GREENTREE TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: TREA (X) Change () Addition
Name: THOMAS, JOHN
Address: 1938 PORTAGE LANDING NORTH
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SEC () Change (X) Addition
Name: MARSHALL, JOHN
Address: 525 S. FLAGLER DRIVE APT 10-C
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP 2 () Change (X) Addition
Name: CARSON, DOROTHY
Address: 17 DUKE DRIVE
City-St-Zip: LAKE WORTH, FL 33460

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: JOHN THOMAS

Electronic Signature of Signing Officer or Director

TREA

04/15/2007

_____ Date