

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004159

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: THE PALM BEACH MUSEUM OF NATURAL HISTORY, INC.

**Current Principal Place of Business:**

2805 EAST OAKLAND PARK BLVD  
402  
FORT LAUDERDALE, FL 33306

**New Principal Place of Business:**

**Current Mailing Address:**

2805 EAST OAKLAND PARK BLVD  
402  
FORT LAUDERDALE, FL 33306

**New Mailing Address:**

FEI Number: 06-1745912      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BATTS, NORLIZA ESQUIRE  
2805 EAST OAKLAND PARK BLVD  
402  
FORT LAUDERDALE, FL 33306 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: P ( ) Delete  
Name: PASCUCCI, JR., RUDOLPH F  
Address: 3200 PALM TRACE LANDINGS DRIVE  
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete  
Name: CICHOCKI, FREDERICK DR.  
Address: 750 NW 6TH DRIVE  
City-St-Zip: BOCA RATON, FL 33486

Title: T ( ) Delete  
Name: FERDINANDO, PETER  
Address: 888 NW 45TH STREET  
City-St-Zip: POMPANO, FL 33064

Title: S ( ) Delete  
Name: FLYNN, PATRICA K  
Address: 2805 EAST OAKLAND PARK BLVD, #402  
City-St-Zip: FORT LAUDERDALE, FL 33306

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

Title: P (X) Change ( ) Addition  
Name: PASCUCCI, JR., RUDOLPH F  
Address: 3200 PALM TRACE LANDINGS DRIVE, #912  
City-St-Zip: DAVIE, FL 33314

Title: VP (X) Change ( ) Addition  
Name: CICHOCKI, FREDERICK DR.  
Address: 67 PEARL STREET  
City-St-Zip: BATH, ME 04530

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 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: RUDOLPH PASCUCCI

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date