

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004159

FILED
May 01, 2012
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 (X)**

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
Name: PASCUCCI, RUDOLPH F JR.
Address: 3202 SHOMA DR.
City-St-Zip: WELLINGTON, FL 33414

Title: VP
Name: FLYNN, PATRICIA K
Address: 2805 EAST OAKLAND PARK BLVD, #402
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: T
Name: PEDRAZZOLI, BRYAN L
Address: 3202 SHOMA DR.
City-St-Zip: WELLINGTON, FL 33414

Title: S
Name: FERDINANDO, PETER
Address: 777 NW 45TH STREET
City-St-Zip: POMPANO, FL 33064

Title: D
Name: CICHOCKI, FREDERICK DR.
Address: 67 PEARL STREET
City-St-Zip: BATH, ME 04530

I hereby 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 all other like empowered.

SIGNATURE: RUDOLPH F. PASCUCCI, JR.

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date