


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 10, 2006 8:00 am**  
**Secretary of State**

02-10-2006 90014 032 \*\*\*\*61.25

**DOCUMENT # N05000004760**

1. Entity Name  
**SENIOR LIFESTYLES INTELLIGENT TALK RADIO, INC.**



Principal Place of Business  
**1597 JEAGA DR  
 JUPITER FL 33458-8726**

Mailing Address  
**1597 JEAGA DR  
 JUPITER FL 33458-8726**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State

4. FEI Number  
**20-2823943**

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**KAUFFMAN, RONALD S  
 1597 JEAGA DR  
 JUPITER FL 33458-8726**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ronald S. Kauffman* **1-25-06**  
Signature, typed or printed name of registered agent, and date, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**FILE NOW: FEE IS \$61.25  
 Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>OB President &amp; CEO (officer)</b> KAUFFMAN, RONALD S - P 1597 JEAGA DR JUPITER FL 33458-8726	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD</b> KAUFFMAN, ELIZABETH G 1597 JEAGA DR JUPITER FL 33458-8726	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> SEINFELD, PAT L 13343 TOUCHSTONE PLACE PALM BEACH GARDENS FL 33418	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President - V/D</b> Jane Merritt 10094 W. Indian Town Rd. Jupiter, FL 33478	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary/TREASURER - S/T/D</b> NANETTE WILSON 5725 Corporate Way, Ste. 101 West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> Jaime ESTREMERÁ-Fitzgerald - D 1764 N. Congress Ave. Ste. 201 West Palm Beach, FL 33409	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> MARK Pafford - D 4700 N. Congress Ave. Ste. 101 West Palm Beach, FL 33407	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> MARNIE Ponce - D 423 FERN ST. - 2ND FL. West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIRECTOR</b> PAUL VATTIATO - D 777 S. FLAGLER DR. Ste. 802 EAST TOWER West Palm Beach, FL 33401-6161	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Ronald S. Kauffman* - Ronald S. Kauffman, Pres/CEO **1-25-06** 561-818-0039

TITLE : CHAIRMAN of the BOARD  
NAME : Todd R. Zellen, Esquire - C/D  
ST. ADDRESS: 955 N.W. 17th Ave. Bldg - C  
City - ST. ZIP: DELRAY BEACH, FL 33445

ADDITION

ATTACHMENT

60013601  
#N0500004760