

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000007208

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Entity Name:** THE PRINCETON ALUMNI ASSOCIATION OF PALM BEACH AND MARTIN COUNTIES, INC.

**Current Principal Place of Business:**

340 ROYAL POINCIANA WAY  
SUITE 321  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

340 ROYAL POINCIANA WAY  
SUITE 321  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 59-2399046

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MAASS, ROBB R ESQ  
340 ROYAL POINCIANA WAY SUITE 321  
PALM BEACH, FL 33480 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: REINHART, BRUCE  
Address: 188 THORNTON DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP  
Name: WORKMAN, LESLEY  
Address: 820 ESTUARY WAY  
City-St-Zip: DELRAY BEACH, FL 33483

Title: S  
Name: NORTHROP, TAYLOR  
Address: 114 NEWCASTLE DR  
City-St-Zip: JUPITER, FL 33458

Title: T  
Name: LAMARCHE, REILLY  
Address: 684 EAGLE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33444

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: BRUCE REINHART

MR.

01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date