


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90249 019 \*\*\*\*61.25

<b>DOCUMENT # N25768</b>							
1. Entity Name PALM BEACH PACKET GROUP, INC.							
Principal Place of Business 1043 WIDGEON ROAD WELLINGTON, FL 33414			Mailing Address 1043 WIDGEON ROAD WELLINGTON, FL 33414				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State			City & State				
Zip	Country	Zip	Country	4. FEI Number 65-0020544			
				Applied For Not Applicable			
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
GREEN, JOHN H 1043 WIDGEON ROAD WEST PALM BEACH, FL 33414			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees			
				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	SCHOFIELD, RICHARD E		NAME	T/O FRANK C. HARRIS			
STREET ADDRESS	2102 LAKE OSBORNE		STREET ADDRESS	512 E PASADENA			
CITY-ST-ZIP	LAKE WORTH, FL 33461		CITY-ST-ZIP	CLEWISTON, FL 33440			
TITLE	VD	<input type="checkbox"/> Delete	TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	TIMBERMAN, ROBERT J		NAME	John Sheats			
STREET ADDRESS	P.O. BOX 847		STREET ADDRESS	17436 79th Ct N.			
CITY-ST-ZIP	LAKE WORTH, FL 33460		CITY-ST-ZIP	Loxahatchee, FL 33470			
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WELCKER, DOUGLAS		NAME				
STREET ADDRESS	6660 KATHERINE RD		STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH, FL 33413		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GREEN, JOHN H		NAME				
STREET ADDRESS	1043 WIDGEON ROAD		STREET ADDRESS				
CITY-ST-ZIP	WELLINGTON, FL 33414		CITY-ST-ZIP				
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CZERMAHN, ANDREW F		NAME				
STREET ADDRESS	2389 IDA WAY		STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH, FL 33415		CITY-ST-ZIP				
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ROYCE, PHILIP		NAME				
STREET ADDRESS	3825 DALE RD		STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH, FL 33406		CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Philip Royce</i>			Date: 12 Jan 06 561 686 3747				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #				