## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000002880

City-St-Zip:

Entity Name: PALM REACH POADPLINNERS INC

FILED Jan 18, 2008 Secretary of State

Littly Na	IIIe. FALIVI DE	ACH ROA	ADRONNERS, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
605 BELVI	EDERE ROAD						
SUITE 9		00.105					
WESTPA	LM BEACH, FL	. 33405	US				
Current Mailing Address:				New Mailing Address:			
605 BELVE	EDERE ROAD						
SUITE 9	LM BEACH, FL	33405	US				
	·						
FEI Number	: 65-0497413	FEI Num	ber Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent R	egistered Agent:	Name and	d Address of	New Registered Agent:	
	ARY AGLER DRIVE, LM BEACH, FL		OOR US				
	named entity se of Florida.	submits th	is statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATU	RE:						
	Electron	ic Signatı	ure of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:		Delete		Title:		(X) Change()Addition	
Name:	RAGSDALE, DA			Name:	KULIN, IAN	A) Change ( ) Addition	
Address:	605 BELVEDER			Address:		ER ROAD, SUITE 9	
City-St-Zip:	WEST PALM BI	EACH, FL 3	33405	City-St-Zip:	WEST PALM	BEACH, FL 33405	
Title:	DVP ()	Delete		Title:	VP/D (	(X) Change ()Addition	
Name:	KURLAND, SANDE			Name:	FOX, CHRIS		
Address:	4348-B HAZEL		EL 22440	Address:		ER ROAD, SUITE 9	
City-St-Zip:	PALM BEACH G	ARDENS, I	FL 33410	City-St-Zip:	PALIVI BEACE	HGARDENS, FL 33405	
Title:	D ()	Delete		Title:	S/D (	(X) Change ( ) Addition	
Name:	WALK, GARY			Name:	HERRON, PA		
Address:	515 N. FLAGLE			Address:		ER ROAD, SUITE 9	
City-St-Zip:	WEST PALM BI	EACH, FL 3	33401	City-St-Zip:	WEST PALM	BEACH, FL 33405	
Title:	D ()	Delete		Title:	T/D (	(X) Change()Addition	
Name:				Name:	KADIS, PATTI		
Address:					605 BELVEDER ROAD, SUITE 9		
City-St-Zip:	PALM BEACH G	SARDENS, I	FL 33418	City-St-Zip:	WEST PALM	BEACH, FL 33405	
Title:	( )	Delete		Title:	D (	( ) Change (X) Addition	
Name:	,			Name:	WALK, GARY		
Addrago:				Address:	E1ENLELACI	LED DDIVE 10TH ELOOD	

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.

City-St-Zip: WEST PALM BEACH, FL 33401

SIGNATURE: GARY WALK D 01/18/2008