

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002824

FILED
Mar 16, 2009
Secretary of State

Entity Name: THE TRADITION OF THE PALM BEACHES, INC.

Current Principal Place of Business:

4847 FRED GLADSTONE DRIVE
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

4847 FRED GLADSTONE DRIVE
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 65-0888855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, KEITH A
4847 FRED GLADSTONE DRIVE
WEST PALM BEACH, FL 33417 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: D () Delete
Name: SIEGEL, HERBERT J
Address: 6 WINDSOR COURT
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: KATZ, STANLEY M
Address: 2 NORTH BREAKERS ROW
City-St-Zip: PALM BEACH, FL 33480

Title: S () Delete
Name: LORING, ARTHUR S
Address: 622 NORTH FLAGLER DRIVE #1001
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP () Delete
Name: PLATZNER, HERBERT B
Address: 6949 FOUNTAINS CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: SPIRA, SEYMOUR L
Address: 3280 MONET DRIVE WEST
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P () Delete
Name: BLOCH, BEATRICE
Address: 3349 ST. MALO COURT
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ENGLESTEIN, ALEC
Address: 680 S. OCEAN BLVD.
City-St-Zip: PALM BEACH, FL 33480

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: KEITH A. MYERS

_____ Electronic Signature of Signing Officer or Director

MR.

03/16/2009

_____ Date