2007 FOR PROFIT CORPORATION a ANNUAL REPORT (AR)

## **FILED** Apr 11, 2007 08:00 All Secretary of State DOCUMENT # P05000139983 1. Entity Name CORNERSTONE PALM BEACH PROPERTIES, INC. Principal Place of Business Mailing Address 164 RIDGE ROAD 164 RIDGE ROAD JUPITER FL 33477 JUPITER FL 33477 2. Principal Place of Businoss - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, otc 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 20-3893087 Not Applicable Zip Country Zıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo SERWNA, JOSEPH B JR. Street Address (P.O. Box Number is Not Acceptable) 164 RIDGE ROAD JUPITER FL 33477 City 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. PTSC U00000698980 Change MIL ☐ Delete TILLE ■ Addition SERWNA, JOSEPH B JR NAME NAME 04/19/07-80025-002 158.75 164 RIDGE RD STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY+ST-ZIP ШЦ Delete TITLE Change ☐ Addition SERWNA, CAROL NAME NAME 164 RIDGE RD STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete Change ■ Addition NAME STREET LADDRESS STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP HILE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP HILE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STRIET ADDRESS CITY-SI-7IP CITY-ST-ZIP 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 offect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

if changed, or on an attachment with an address, withhall other like empowered,