

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northern
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 14 AM 8:33

DOCUMENT # P93000006893 (0)

1. Corporation Name

PALM BEACH COUNTRY ESTATES, INC.

Principal Place of Business

Mailing Address

6973 DONALD ROSS RD
PALM BEACH GARDENS FL 33418-8306

6973 DONALD ROSS RD
PALM BEACH GARDENS FL 33418-8306

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/25/1993

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0386750

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes

No

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERMAN, ROBERT A
6731 DONALD ROSS RD
PALM BEACH GARDENS FL 33418-8306**

81 Name

Robert A. Berman

82 Street Address (P.O. Box Number is Not Acceptable)

6973 Donald Ross Road

83

84 City

Palm Beach Gardens

FL

85 Zip Code

33418-8306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered office or (solely for right to file) in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Robert A. Berman

Robert A. Berman

3-10-95

(Signatures from a current registered agent and the filer are required)

(2011: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **D**
NAME: **BERMAN, ROBERT A**
STREET ADDRESS: **6973 DONALD ROSS RD**
CITY-ST-ZIP: **PALM BEACH GARDENS FL 33418-8306**

1.1 TITLE: **President/ Director** Change Addition
1.2 NAME:
1.3 STREET ADDRESS:
1.4 CITY-ST-ZIP:

TITLE: **D**
NAME: **BERMAN, JOANNE F**
STREET ADDRESS: **6973 DONALD ROSS RD**
CITY-ST-ZIP: **PALM BEACH GARDENS FL 33418-8306**

2.1 TITLE: Change Addition
2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

3.1 TITLE: Change Addition
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

4.1 TITLE: Change Addition
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

5.1 TITLE: Change Addition
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

6.1 TITLE: Change Addition
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:

14. I hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), Florida Statutes. I further certify that the information provided on this filing 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:

Robert A. Berman

Robert A. Berman, President

3-10-95

(SIGNATURE AND TYPED ON PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR)

(407) 627-1118