# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Sep 13, 2007**
**Secretary of State**

DOCUMENT# P93000078733

**Entity Name:** SAFC OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

6185 JOG ROAD
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

6185 JOG RD.
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number: 65-0453749** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUBSCHER, DONNA A PTDS
6185 JOG RD.
LAKE WORTH, FL 33467 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

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete
Name: HUBSCHER, DONNA A PTDS
Address: 8005 PELICAN HARBOUR DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VP ( ) Delete
Name: HUBSCHER, BONNIE J VP
Address: 8117 PELICAN HARBOUR DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VP ( ) Delete
Name: HUBSCHER, TAYLOR M VP
Address: 1027 10TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTSD (X) Change ( ) Addition
Name: HUBSCHER, DONNA A PTDS
Address: 8005 PELICAN HARBOUR DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA A. HUBSCHER PTSD 09/13/2007

Electronic Signature of Signing Officer or Director Date