

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **711917** (5)
1. Corporation Name
PALM BEACH COUNTY GENEALOGICAL SOCIETY, INC.

Principal Place of Business FLAGLER PARK, CLEMATIS STREET P.O. BOX 1746 WEST PALM BEACH FL 33402	Mailing Address FLAGLER PARK, CLEMATIS STREET P.O. BOX 1746 WEST PALM BEACH FL 33402
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
30	

3. Date Incorporated or Qualified 12/07/1966	Applied For
4. FEI Number 23-7107721	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SHEPLEY, RAYMOND 212 DYER ROAD WEST PALM BEACH FL 33405 -1218	10. Name and Address of New Registered Agent
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	SD WHITTINGTON, MARLYNN <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLEN, MISS JANE M.	1.2 NAME	
STREET ADDRESS	4564 HOLLY LAKE DR.	1.3 STREET ADDRESS	701 NW 5th AVE
CITY-ST-ZIP	LAKE WORTH FL	1.4 CITY-ST-ZIP	BOCA RATON, FL 33432-2569
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	LENTSCH, MRS ALVIN	2.2 NAME	
STREET ADDRESS	3802 LAKE OSBORNE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	PPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, BRETT D.	3.2 NAME	BROWN, BRETT D.
STREET ADDRESS	237 WEDGEWOOD CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	
TITLE	PPD <input type="checkbox"/> DELETE	4.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, DAHRL E.	4.2 NAME	MOORE, DAHRL E
STREET ADDRESS	400 N.E. 20TH STREET, A-206	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	
NAME	SHEPLEY, RAYMOND	5.2 NAME	
STREET ADDRESS	212 DYER ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33405-1218	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Raymond Shepley** **22 Jan 98 (561) 833-2640**

CR2E037 (10/97)