# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 20, 2006**
**Secretary of State**

DOCUMENT# 722805

**Entity Name:** RAPALLO SOUTH, INC.

**Current Principal Place of Business:**

1801 S. FLAGLER DR.
W. PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

1801 S. FLAGLER DR.
W. PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number: 59-1440220** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NASON, GULDAN, YEAGER & GERSON
1645 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33402 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: | MOORE, REID | |
| Address: | 1801 S FLAGLER DRIVE | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |
| Title: | VP | ( ) Delete |
| Name: | SHOR, MORTON | |
| Address: | 1801 S. FLAGLER DRIVE | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |
| Title: | P | ( ) Delete |
| Name: | HOLDEN, TED | |
| Address: | 1801 S. FLAGLER DRIVE | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |
| Title: | D | ( ) Delete |
| Name: | FARBER, HELEN | |
| Address: | 1801 S. FLAGLER DRIVE | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |
| Title: | D | ( ) Delete |
| Name: | KNAPP, STANLEY | |
| Address: | 1801 S FLAGLER DR | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |
| Title: | D | ( ) Delete |
| Name: | EVERETT, CLAIRE | |
| Address: | 1801 S. FLAGER DR. | |
| City-St-Zip: | WEST PALM BEACH, FL 33401 | |

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TED HOLDEN P 01/20/2006

Electronic Signature of Signing Officer or Director — Date