
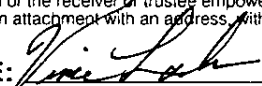


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90156 002 ****61.25

DOCUMENT # N06000003145					
1. Entity Name COMMUNITY LAND TRUST OF PALM BEACH COUNTY, INC.					
Principal Place of Business 3323 BELVEDERE RD., BLDG. 501, C/O HOUSING AND COMMUNITY DEVELOPMENT WEST PALM BEACH, FL 33406			Mailing Address 3323 BELVEDERE RD., BLDG. 501, C/O HOUSING AND COMMUNITY DEVELOPMENT WEST PALM BEACH, FL 33406		
2. Principal Place of Business - No P.O. Box # 160 Australian Ave.		3. Mailing Address 160 Australian Ave.			
Suite, Apt. #, etc. Suite 500		Suite, Apt. #, etc. Suite 500		02132007 Chg-NP CR2E037 (12/06)	
City & State West Palm Beach, FL		City & State West Palm Beach FL		4. FEI Number 20-5090958	
Zip 33406		Country U.S.		Zip 33406	
Country U.S.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. ONE SE THIRD AVE., 28TH FLOOR MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP CORBETT, JOHN <input type="checkbox"/> Delete 2001 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Larkins, Vince 1300 West Lantana Road, Suite 200 Lantana, FL 33462	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete JOHNSON, TERESA 1700 N. AUSTRALIAN AVE. W. PALM BEACH, FL 33401		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Johnson, Teresa 1700 N. Australian Ave. W. Palm Beach, FL 33401	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO <input type="checkbox"/> Delete STEINBACHER, CASEY 3970 RCA BLVD., STE. 7101 PALM BEACH GARDENS, FL 334104231		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Steinbacher, Casey 3970 RCA BLVD, STE 7101 PALM BEACH GARDENS, FL 33410231	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete TITCOMB, JAMES 301 N. OLIVE AVE., 10TH FLOOR, STE. 1002.17 W. PALM BEACH, FL 33401		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete WALKER, DOROTHY 349 SE THIRD ST. BELLE GLADE, FL 33430		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Wheat, Tim 1921 Abbey Road West Palm Beach, FL 33415	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Vince Larkins		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			March 30, 2007 1-877-9103247 <small>Date Daytime Phone #</small>		

ATTACHMENT 40066549

#NO 60000.03145-

ADDITION: X

TITLE: D

NAME: Clifford I. Hertz P.A.

STREET ADDRESS: 1 North Clematis St. Suite 500

CITY-ST-ZIP: West Palm Beach, Florida 33401

ADDITION: X

TITLE: D

NAME: Sturat L. Scharaga

STREET ADDRESS: P.O. Box 31599

CITY-ST-ZIP: Palm Beach Gardens, FL 33420

ADDITION: X

TITLE: T/D

NAME: Wanda Gadson

STREET ADDRESS: 2110 North Florida Mango Suite 200

CITY-ST-ZIP: West Palm Beach, Florida 33409

ADDITION: X

TITLE: D

NAME: Roy Mouton

STREET ADDRESS: 15886 85th Road North

CITY-ST-ZIP: Loxahatchee, Florida 33470

ADDITION: X

TITLE: D

NAME: Hazel Lucas

STREET ADDRESS: 423 Fern Street, Suite 220

CITY-ST-ZIP: West Palm Beach, Florida 33401

ADDITION: X

TITLE: D

NAME: Angela Usher

STREET ADDRESS: 3300 Forest Hill Blvd, Suite C-110

CITY-ST-ZIP: West Palm Beach, Florida 33401

ADDITION: X

TITLE: VP/D

NAME: Annetta Jenkins

STREET ADDRESS: 1655 Palm Beach Lakes Blvd Suite 610

CITY-ST-ZIP: West Palm Beach, Florida 33401