

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24559

FILED
Aug 19, 2009
Secretary of State

Entity Name: BRAILLE CLUB OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

4801 SOUTH DIXIE
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

4801 SOUTH DIXIE
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 59-2484799 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SORGINI, ROBERT
300 N. FEDERAL HWY.
SUITE 3
LAKE WORTH, FL 33460 US

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: POD () Delete
Name: RANDI, RABINER
Address: 5198 TOS CANATRAIL
City-St-Zip: BOYNTON BEACH, FL 33437

Title: 1VPD () Delete
Name: DIETZ, BETTY
Address: 411 BARNETT STREET
City-St-Zip: WEST PALM BEACH, FL 33405

Title: 2VPD () Delete
Name: TROIANO, RICK
Address: 21 COLONIAL CLUB DR, APT 100
City-St-Zip: BOYNTON BEACH, FL 33435

Title: SD () Delete
Name: ENYERS, GWEN
Address: 3020 AVENUE O
City-St-Zip: RIVIERA BEACH, FL 33404

Title: BD () Delete
Name: DOWREY, HARRIET
Address: 615 N 'C' ST
City-St-Zip: LAKE WORTH, FL 33461

Title: T () Delete
Name: BURRON, DALE
Address: 38001 DALE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

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 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: RANDI RABINER

POD

08/19/2009

Electronic Signature of Signing Officer or Director

Date