

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000010773

Entity Name: D R PALM BEACH, INC.**Current Principal Place of Business:**1800 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33401**Current Mailing Address:**1800 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33401**FEI Number:** 65-0467441**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOOD, MICHAEL
1800 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33401 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**Officer/Director Detail :**

Title	PD
Name	DELLA RATTA, JOSEPH M
Address	1800 PALM BEACH LAKES BLVD.
City-State-Zip:	WEST PALM BEACH FL 33401

Title	S
Name	DELLA RATTA, J. RAPHAEL
Address	3890 RT 97
City-State-Zip:	GLENWOOD MD 21738

Title	T
Name	REDMOND, JENNIFER
Address	4271 N 38TH STREET
City-State-Zip:	ARLINGTON VA 22207

Title	VS
Name	WOOD, MICHAEL
Address	1800 PALM BEACH LAKES BLVD
City-State-Zip:	WEST PALM BEACH FL 33401

Title	S
Name	DELLA RATTA, ELIZABETH
Address	3900 RT 97
City-State-Zip:	GLENWOOD MD 21738

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL WOOD**VICE PRESIDENT****03/24/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date