

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90132 001 ***211.25

DOCUMENT # 140566

1. Entity Name
EMBASSY CORPORATION



Principal Place of Business

**2 FOUR ARTS PLZ
PALM BEACH, FL 33480 US**

Mailing Address

**2 FOUR ARTS PLZ
PALM BEACH, FL 33480 US**

66010359



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03192007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-0294178

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUGGAN, ERVIN
2 FOUR ARTS PLZ
PALM BEACH, FL 33480**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature; typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **DIXON, FITZ E JR**
STREET ADDRESS **320 EL VEDADO ROAD**
CITY-ST-ZIP **PALM BEACH, FL**

TITLE **VD** ☐ Delete
NAME **HOYT, BARRY**
STREET ADDRESS **133 BANYAN ROAD**
CITY-ST-ZIP **PALM BEACH, FL 33480**

TITLE **VD** ☐ Delete
NAME **MOORE, DUDLEY**
STREET ADDRESS **220 E. BRAVO**
CITY-ST-ZIP **PALM BEACH, FL 33480**

TITLE **S** ☐ Delete
NAME **GUBELMANN, WILLIAM**
STREET ADDRESS **1 N CLEMATIS ST.**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

TITLE **VD** ☐ Delete
NAME **SCAFF, DAVID**
STREET ADDRESS **159 SEASPRAY AVE**
CITY-ST-ZIP **PALM BEACH, FL 33480**

TITLE **TD** ☐ Delete
NAME **NYHEIM, JOHN**
STREET ADDRESS **369 SOUTH LAKE DRIVE**
CITY-ST-ZIP **PALM BEACH, FL 33480**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Change ☒ Addition
NAME **Mrs. Earth Dixon**
STREET ADDRESS **220 EL Vedado Road**
CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **VD** ☐ Change ☒ Addition
NAME **Mr. John Schuler**
STREET ADDRESS **200 Jungle Road**
CITY-ST-ZIP **Palm Beach FL 33480**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY HOYT

4-13-07

Date

561-655-7227

Daytime Phone #