


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 252283 1. Entity Name PALM BEACH DEVELOPMENT CORP	
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Principal Place of Business 505 SOUTH FLAGLER DRIVE SUITE 1300 WEST PALM BEACH, FL 33401	Mailing Address 505 SOUTH FLAGLER DRIVE SUITE 1300 WEST PALM BEACH, FL 33401
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DO NOT WRITE IN THIS SPACE



03092006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-0991123

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent LASSITER, WILLIAM G. JR. 505 SOUTH FLAGLER DRIVE SUITE 1300 WEST PALM BEACH, FL 33401

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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 re-registering) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000474676 04/04/06-80033-006 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LASSITER, WILLIAM G. JR 505 S FLAGLER DR., #1300 WEST PALM BCH, FL 33401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S OWENS, MARTHA 505 S. FLAGLER DR., #1300 WEST PALM BCH, FL 33401
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **W.G. LASSITER, JR** **3/15/06** **561-659-442**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #