

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthan,
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **339705** (6)

1. Corporation Name

THE REGENCY OF PALM BEACH, INC.



Principal Place of Business

**2760 SOUTH OCEAN BLVD.
PALM BEACH FL 33480**

Mailing Address

**2760 SOUTH OCEAN BLVD.
PALM BEACH FL 33480**

3. Date Incorporated or Qualified 12/31/1968	3a. Date of Last Report 06/06/1995
4. FEI Number 59-1295501	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contributor <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**HIRSCH, HERBERT
2760 S. OCEAN BLVD #104
PALM BCH FL 33480**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (handwritten or printed name of the person signing on behalf of the corporation)

Date (handwritten or printed date of signature)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	S	<input type="checkbox"/> DELETE
NAME	PARETTIS FRED	
STREET ADDRESS	2760 S OCEAN BLVD	
CITY-ST-ZIP	PALM BCH FL	
TITLE	CP	<input type="checkbox"/> DELETE
NAME	GORDON, ROBERT	
STREET ADDRESS	2760 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BCH FL	
TITLE	CVP	<input type="checkbox"/> DELETE
NAME	HUT, ALAN	
STREET ADDRESS	2760 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BCH FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	ZOLOT, MARVIN	
STREET ADDRESS	2760 S OCEAN BLVD	
CITY-ST-ZIP	PALM BCH FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	DREXLER, MOLLIE	
STREET ADDRESS	2760 S OCEAN BLVD	
CITY-ST-ZIP	PALM BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	Exec. V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	George Popkin	
13 STREET ADDRESS	2760 S. Ocean Blvd.	
14 CITY-ST-ZIP	Palm Beach, Fl. 33480	
21 TITLE	1st V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Herbert Hirsch	
23 STREET ADDRESS	2760 S. Ocean Blvd.	
24 CITY-ST-ZIP	Palm Beach, Fl. 33480	
31 TITLE	2nd V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Hut, Alan	
33 STREET ADDRESS	2760 S. Ocean Blvd.	
34 CITY-ST-ZIP	Palm Beach, Fl. 33480	
41 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Fred Paretts	
43 STREET ADDRESS	2760 S. Ocean Blvd.	
44 CITY-ST-ZIP	Palm Beach, Fl. 33480	
51 TITLE	Treasur.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Richard Rothenberg	
53 STREET ADDRESS	2760 S. Ocean Blvd.	
54 CITY-ST-ZIP	Palm Beach, Fl. 33480	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment, with an address.

SIGNATURE:

Alan Hut
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96

407-585-0096

CR2E034 (12/95)