

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90060 044 ****61.25

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01132006 Chg-NP CR2E037 (11/05)

4. FEI Number **59-1118291** Applied For ☐ Not Applicable ☒

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

6. Name and Address of Current Registered Agent

CORE, DAVID A ESQ.
1600 FORUM PLACE
CENTURION TOWER, SUITE 701
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

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 *Timothy G. Anthony* *Timothy G. Anthony* President *2-14-2006*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	SCOTT, FRANK	2840 S OCEAN BLVD., #614	PALM BEACH, FL 33480	<input type="checkbox"/>
DVP	AMICO, LINDA	2840 S OCEAN BLVD., #110	PALM BEACH, FL 33480	<input type="checkbox"/>
DT	MEMOLY, GEORGE	2840 S OCEAN BLVD., #426	PALM BEACH, FL 33480	<input checked="" type="checkbox"/>
DP	SPIVAK, JANICE	2840 S OCEAN BLVD., #126	PALM BEACH, FL 33480	<input checked="" type="checkbox"/>
DS	GOLDMAN, JUNE	2840 S OCEAN BLVD., #108	PALM BEACH, FL 33480	<input type="checkbox"/>
D	ANTHONY, TIM	2840 S. OCEAN BLVE., #414	PALM BEACH, FL 33480	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DP	Timothy Anthony	2840 S Ocean Blvd #414	Palm Beach, FL 33480	<input checked="" type="checkbox"/>
DT	Corey Platzner	2840 S. Ocean Blvd #606	Palm Beach, FL 33480	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	Diane Jacoby	2840 S. Ocean Blvd #212	Palm Beach, FL 33480	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	Barbara Grossman	2840 S. Ocean Blvd #506	Palm Beach, FL 33480	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	George Memoly	2840 S Ocean Blvd #426	Palm Beach, FL 33480	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D	Arthur Nalpern	2840 S. Ocean Blvd #326	Palm Beach, FL 33480	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 617, 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: *Timothy G. Anthony* *Timothy G. Anthony* President *2-14-2006*
Signature and typed or printed name of signing officer or director Date Daytime Phone #