

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716352

FILED  
Jan 23, 2007  
Secretary of State

**Entity Name:** PALM BEACH COUNTY SAFETY PATROL ASSOCIATION, INC.

**Current Principal Place of Business:**

2642 CLIPPER CIRCLE  
WEST PALM BEACH, FL 33411 US

**New Principal Place of Business:**

7709 OAKMONT DRIVE  
LAKE WORTH, FL 33467 US

**Current Mailing Address:**

2642 CLIPPER CIRCLE  
WEST PALM BEACH, FL 33411 US

**New Mailing Address:**

7709 OAKMONT DRIVE  
LAKE WORTH, FL 33467 US

**FEI Number:** 59-2379971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SILLS, STEPHEN  
3550 LYONS ROAD  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: T (X) Delete  
Name: MYERS, SARI  
Address: 7444 SALLY LYNN LANE  
City-St-Zip: LAKE WORTH, FL 33467

Title: VD ( ) Delete  
Name: SHAW, CHUCK  
Address: 3312 FOREST HILL BLVD A242  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D (X) Delete  
Name: PROCTOR, MICHAEL J  
Address: 16020 OKEECHOBEE ROAD  
City-St-Zip: WEST PALM BEACH, FL

Title: P ( ) Delete  
Name: SILLS, STEPHEN  
Address: 7709 OAKMONT DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP/S (X) Change ( ) Addition  
Name: SHAW, CHUCK  
Address: 2252 SOUNDINGS COURT  
City-St-Zip: GREENACRES, FL 33413

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P/D (X) Change ( ) Addition  
Name: SILLS, STEPHEN  
Address: 7709 OAKMONT DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES E SHAW

VP/S

01/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date