2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2012
Secretary of State

DOCUMENT# 724073

Entity Name: THE SHAMROCK CLUB OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

428 SOUTH H STREET
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

428 SOUTH H STREET
LAKE WORTH, FL 33460

New Mailing Address:

C/O NORA ANNE FREEMAN, 530 HORIZONS EAST 304
BOYNTON BEACH, FL 33435

FEI Number: 59-1494027 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FREEMAN, N. ANNE
530 HORIZONS EAST #304
BOYNTON BEACH, FL 33435 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: 2VP
Name: WHELAN, MICHAEL
Address: 210 HORIZONS W 212
City-St-Zip: BOYNTON BEACH, FL 33435

Title: P
Name: BEHAN, MARTIN
Address: 350 HORIZONS EAST #101
City-St-Zip: BOYNTON BEACH, FL 33435

Title: 1VP`
Name: HOPKINS, FRANK
Address: 3520 MIRA MONTES CIRTLE
City-St-Zip: WELLINGTON, FL 33414

Title: T
Name: FREEMAN, N. ANNE
Address: 530 HORIZONS E 304
City-St-Zip: BOYNTON BEACH, FL 33435

Title: RS
Name: FITZMAURICE, DYMPNA
Address: 599 GOLF DRIVE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CS
Name: KELLY, KATHY
Address: 530 HORIZONS EAST #304
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby 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 all other like empowered.

SIGNATURE: N. ANNE FREEMAN TREA 02/20/2012

Electronic Signature of Signing Officer or Director — Date