

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726299

FILED  
Apr 11, 2005  
Secretary of State

**Entity Name:** THE URBAN LEAGUE OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

1700 N. AUSTRALIAN AVE.  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

1700 N. AUSTRALIAN AVE.  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 59-1533710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIEDMAN, ROBERT  
560 VILLAGE BLVD., SUITE 100  
WEST PALM BEACH, FL 33409 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: DT ( ) Delete  
Name: MCDONOUGH, TIMOTHY  
Address: 2200 OLD GERMANTOWN ROAD  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: DS ( ) Delete  
Name: BROWN, LARRY  
Address: 1300 ALLENDALE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: DC ( ) Delete  
Name: FRIEDMAN, ROBERT  
Address: 560 VILLAGE BLVD., SUITE 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: DVC ( ) Delete  
Name: RAY, HAROLD  
Address: 2101 AUSTRALIAN AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407 US

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

Title: DT (X) Change ( ) Addition  
Name: ROBIN, NANCY L  
Address: 9600 ALT. A1A  
City-St-Zip: PALM BEACH GARDEN, FL 33410 US

Title: DS (X) Change ( ) Addition  
Name: OWENS, ERVIN  
Address: 5353 PARKSIDE DR., RFA  
City-St-Zip: JUPITER, FL 33458 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRIEDMAN, ROBERT

DC

04/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date