

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728478

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** 1690 HOLDING CORPORATION, INC.

**Current Principal Place of Business:**

1840 ALICE AVE.  
WEST PALM BCH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

1840 ALICE AVENUE  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

**FEI Number:** 23-7354121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VERNON, BRETT  
1835 SHADOW CREEK RD.  
WEST PALM BEACH, FL 33413 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: PD  
Name: VERNON, BRETT  
Address: 1835 SHADOW CREEK RD.  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: VPD  
Name: MOONEY, SHAWN  
Address: 8639 AVOCADO BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: STD  
Name: HUNTER, STARR  
Address: 702 CROSSWINDS DR.  
City-St-Zip: WEST PALM BEACH, FL 33413

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: BRETT VERNON

PD

03/22/2012

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

\_\_\_\_\_  
Date