

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 17, 2012
Secretary of State**

DOCUMENT# 729734

Entity Name: PALM BEACH MARITIME MUSEUM, INC.

Current Principal Place of Business:7719 S. DIXIE HWY
WEST PALM BEACH, FL 33405**New Principal Place of Business:**4512 N. FLAGLER DRIVE
SUITE 206
WEST PALM BEACH, FL 33407**Current Mailing Address:**P.O. BOX 2317
PALM BEACH, FL 33480**New Mailing Address:**

FEI Number: 59-1540474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GRANT, JOHN C
7719 S. DIXIE HWY
WEST PALM BEACH, FL 33405 US**Name and Address of New Registered Agent:**GRANT, JOHN C
4512 N. FLAGLER DRIVE
SUITE 206
WEST PALM BEACH, FL 33407 US

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:

08/17/2012

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**Title: CD
Name: DONNELLEY, THORNE JR.
Address: 4512 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407Title: STD
Name: SMITH, MELBOURNE
Address: 4512 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407Title: D
Name: BURCKART, WILLIAM E
Address: 4512 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407Title: D
Name: KENNEDY, BRIAN
Address: 4512 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407Title: PCEO
Name: GRANT, JOHN C
Address: 4512 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407

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: JOHN C. GRANT

PCEO

08/17/2012

Electronic Signature of Signing Officer or Director_____
Date