

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 8:00 am
Secretary of State

01-08-2007 90253 011 ****61.25

DOCUMENT # 729930

1. Entity Name
100 CLUB OF SOUTH PALM BEACH COUNTY, INC.



Principal Place of Business
201 N FEDERAL HWY
SUITE 114
DEERFIELD BEACH, FL 33441 US

Mailing Address
201 N FEDERAL HWY
SUITE 114
DEERFIELD BEACH, FL 33441 US

40000466



01042007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address		4. FEI Number 59-1756721		Applied For Not Applicable	
Suite Apt # etc		Suite Apt # etc		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
OSBORNE, R. BRADY JR P O DRAWER 40 BOCA RATON, FL 33432				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL Zip Code			

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____
Signature typed or printed name of registered agent on back of each page. NOTE: Registered Agent's signature required when re-registering. DATE: _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	T	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	HILL, DOUGLAS D			NAME			
STREET ADDRESS	201 NORTH FEDERAL HWY #114			STREET ADDRESS			
CITY-STATE-ZIP	DEERFIELD BEACH, FL 334413621			CITY-STATE-ZIP			
TITLE	DVP	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	LAWLESS, PAUL M			NAME			
STREET ADDRESS	1877 S FEDERAL HWY, STE. 210			STREET ADDRESS			
CITY-STATE-ZIP	BOCA RATON, FL 33432			CITY-STATE-ZIP			
TITLE	D	☒ Delete		TITLE		☐ Change	☐ Addition
NAME	MILLER, CHARLES B			NAME			
STREET ADDRESS	23287 BLUE WATER CIRCLE #A507			STREET ADDRESS			
CITY-STATE-ZIP	BOCA RATON, FL 334337020			CITY-STATE-ZIP			
TITLE	VP	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	SMITH, BILL			NAME			
STREET ADDRESS	850 VIA CABANO			STREET ADDRESS			
CITY-STATE-ZIP	BOCA RATON, FL			CITY-STATE-ZIP			
TITLE	P	☒ Delete		TITLE		☐ Change	☐ Addition
NAME	OSBORNE, R. BRADY			NAME			
STREET ADDRESS	P O DRAWER 40			STREET ADDRESS			
CITY-STATE-ZIP	BOCA RATON, FL			CITY-STATE-ZIP			
TITLE	VP	☐ Delete		TITLE		☐ Change	☐ Addition
NAME	MALIFANTO, GREGORY			NAME			
STREET ADDRESS	920 MULBERRY WAY			STREET ADDRESS			
CITY-STATE-ZIP	BOCA RATON, FL 33486			CITY-STATE-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. Douglas Hill 1-4-07 954-420-5599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #