

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729951

FILED
Apr 25, 2006
Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS CHAPTER 280, INC.

Current Principal Place of Business:

P.O. BOX 5707
LAKE WORTH, FL 334662707

New Principal Place of Business:

Current Mailing Address:

11150 OKEECHOBEE BLVD. SUITE C
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 23-7015010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAZARETH, EFFIE
11150 OKEECHOBEE #C
WEST PALM BEACH, FL 33411 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: P VP () Delete
Name: MILLER, ROBERT
Address: 1720 W. TERRACE DR.
City-St-Zip: LAKE WORTH, FL 33460

Title: VP () Delete
Name: LAUX, CHRISTOPHER
Address: 2604 CANNAL SIDE DRIVE
City-St-Zip: GREENACRES, FL 33463

Title: T () Delete
Name: RIESTER, WILLIAM
Address: 4070 WATERWAY DR.
City-St-Zip: LAKE WORTH, FL 33461

Title: VPM () Delete
Name: BROOKS, SUSAN
Address: 234 DOWN EAST LANE
City-St-Zip: LW, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P VP (X) Change () Addition
Name: MILLER, ROBERT
Address: 548 ANCHORAGE DR.
City-St-Zip: N.PALM BEACH, FL 33408

Title: VPF (X) Change () Addition
Name: QUYLE, VIVIAN
Address: 2871 NEW YORK ST.
City-St-Zip: WEST PALM BEACH, FL 33406

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

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

Title: EG () Change (X) Addition
Name: BLAKENEY, PAULINE
Address: 1016 FOREST CT.
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROBERT MILLER

PVP

04/25/2006

Electronic Signature of Signing Officer or Director

Date