

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730631

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: PALM BEACH COUNTY JUNIOR GOLF ASSOC., INC.

**Current Principal Place of Business:**

1300 WOOD ROW WAY  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 145  
LOXAHATCHEE, FL 33470 US

**New Mailing Address:**

FEI Number: 59-1781898      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SMITH, DENISE  
17 WINDWARD ISLE  
PALM BEACH GARDENS, FL 33418 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: VPD ( ) Delete  
Name: SHERMAN, GREG S  
Address: 9960 PINEAPPLE TREE WAY #208  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: PD ( ) Delete  
Name: EVELYN, SHEILA  
Address: 1300 WOODROW WAY  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: TD ( ) Delete  
Name: EVELYN, SHEILA  
Address: 1300 WOOD ROW WAY  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: D ( ) Delete  
Name: MCLELLAN, MIKE  
Address: 5840 AMETHYST COURT  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TD ( ) Delete  
Name: SMYTH, DENISE  
Address: 17 WINDWARD ISLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD ( ) Delete  
Name: GARTIN, BILL  
Address: 6209 UNGERER ST.  
City-St-Zip: JUPITER, FL 33458

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

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

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

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

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

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: DENISE SMYTH

TD

04/30/2005

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

\_\_\_\_\_  
Date