2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735420

FILED Apr 28, 2006 Secretary of State

Entity Name: SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, PALM BEACH COUNTY CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

1217 LAKE GENEVA DR. LAKE WORTH, FL 334616043 US

Current Mailing Address: New Mailing Address:

P. O. BOX 151

LAKE WORTH, FL 334600151 US

FEI Number: 59-2346491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCTAGUE, JOEL JD CHFC
7805 SW 6TH CT
PLANTATION, FL 33324 US
DIXON, DANIEL I CFP CLU
511 NW 50TH PLACE
BOCA RATON, FL 33431 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: DANIEL I. DIXON, CLU, CHFC, CFP 04/28/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: IPP () Delete Title: IPP (X) Change () Addition Name: BOYLES, KEVAN JD Name: MCTAGUE, JOEL JD CHFC

Address: 350 ROYAL PALM WAY Address: 7805 SW 6TH CT
City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PLANTATION, FL 33324

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MCTAGUE, JOEL CHFC JD
 Name:
 DIXON, DANIEL I CFP CLU

 Address:
 7805 SW 6TH CT
 Address:
 511 NW 50TH PLACE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 BOCA RATON, FL 33401

 $\label{eq:title: VD () Delete Title: VD (X) Change () Addition} \end{minipage}$

Name:DIXON, DANIEL CLU CFPName:BRYSH, WALTER CPAAddress:1515 NORTH FEDERAL HWY #214Address:21301 POWERLINE ROADCity-St-Zip:BOCA RATON, FL 33432City-St-Zip:BOCA RATON, FL 33433

Title: SEC () Delete Title: SEC (X) Change () Addition

Name:BRYSH, WALTER CPAName:HANES, DARLENE M CLU CHFAddress:SUITE 204 21301 POWERLINE ROADAddress:5681 NORTH POINTE LANE

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOYNTON BEACH, FL 33437

Title: TR () Delete Title: () Change () Addition

 Name:
 HANES, DARLENE M CLU CHF
 Name:

 Address:
 5681 NORTH POINTE LANE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33437
 City-St-Zip:

Title: DIR () Delete Title: DIR (X) Change () Addition Name: COURY, ROBERT CLU Name: DI LORENZO, TERESA CHFC

Address: 2500 NORTH MILITARY TRAIL #160 Address: 601 NORTH CONGRESS AVE City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: DELRAY BEACH, FL 33445

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: DARLENE M. HANES, CLU, CHFC SEC 04/28/2006

Electronic Signature of Signing Officer or Director

Date