

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90051 041 ****61.25

DOCUMENT # 744176

1. Entity Name
PALM BEACH COUNTY DARTING ASSOCIATION, INC.



Principal Place of Business
**579 TALLULAH RD
LANTANA, FL 33462 US**

Mailing Address
**P O BOX 20023
WEST PALM BEACH, FL 33416 US**

40068134



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03132008 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JORDAN, BECKY
579 TALLULAH RD
LANTANA, FL 33462**

7. Name and Address of New Registered Agent

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JORDAN, BECKY
STREET ADDRESS 579 TALLULAH RD
CITY-ST-ZIP LANTANA, FL 33462 ☐ Delete

TITLE TD
NAME ROACH, PAM
STREET ADDRESS 3943 PRINCESS DONNA CT EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436 ☐ Delete

TITLE SD
NAME BEBOURGEOIS, SUSAN
STREET ADDRESS 355 MADDOCK STREET
CITY-ST-ZIP WEST PALM BEACH, FL 33405 ☒ Delete

TITLE V
NAME SPADE, RAY
STREET ADDRESS 1021 MANGO DR
CITY-ST-ZIP WEST PALM BEACH, FL 33415 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME Kristine Briggs
STREET ADDRESS 4113 Semmole Gardens Cir WPB FL 33418
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Becky Jordan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/08 561-436-0522
Date Daytime Phone #