2004 NOT:FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 23, 2004 08:00 AM Secretary of State **DOCUMENT # 751519** 1. Entity Name WORTH AVENUE ASSOCIATION, INC. Mailing Address Principal Place of Business 318 WORTH AVENUE PO BOX 2126 PALM BEACH FL 33480 PO BOX 2126 PALM BEACH FL 33480 3. Mailing Address 2. Principal Place of Business Suite, Apt #. etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-2088930 Not Applicable Ζp Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BUSH, KATHY Street Address (P.O. Box Number is Not Acceptable) 4552 BROOK DR WEST PALM BEACH FL 33417 Zip Code City 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change TITLE Addition TITLE Dalete SCHWALBERG, MARTIN NAME NAME Ung0000063734 329 WORTH AVENUE STREET ADDRESS STREET ADDRESS 02/23/04-80170-015 61.25 PALM BEACH FL 33480 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE Addition TITLE RIEHTER, STEFAN NAME NAME 224 WORTH AVENUE STREET ADDRESS STREET ADDRESS PALM BEACH FL City-St-ZiP CITY+ST-2IP ☐ Change П Additiол TITLE TITLE Delete KASSATLY, ED NAME NAME 250 WORTH AVE STREET ADDRESS STREET ADDRESS PALM BEACH FL CITY - ST - 2IP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE KLYOKAWA, PETER NAME NAME 329 WORTH AVE STREET ADDRESS STREET ADDRESS PALM BEACH FL CITY+ST-ZIP CITY - ST-ZIP SD Change Addition ☐ Delete TITLE TITLE FRANKEL, SHERRY NAME NAME 256 WORTH AVENUE STREET ADDRESS STREET ADDRESS PALM BEACH FL 33480 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME. NAME STREET ADDRESS STREET ADDRESS City-St-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

FILED