2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2005
Secretary of State

DOCUMENT# 751519

Entity Name: WORTH AVENUE ASSOCIATION, INC.

Current Principal Place of Business:

318 WORTH AVENUE
PO BOX 2126
PALM BEACH, FL 33480

New Principal Place of Business:

329 WORTH AVENUE
PO BOX 2126
PALM BEACH, FL 33480

Current Mailing Address:

PO BOX 2126
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-2088930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUSH, KATHY
4552 BROOK DR
WEST PALM BEACH, FL 33417 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:	D	( ) Delete
Name:	SCHWALBERG, MARTIN	
Address:	329 WORTH AVENUE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	VD	( ) Delete
Name:	RIEHTER, STEFAN	
Address:	224 WORTH AVENUE	
City-St-Zip:	PALM BEACH, FL	
Title:	P	( ) Delete
Name:	KASSATLY, ED	
Address:	250 WORTH AVE	
City-St-Zip:	PALM BEACH, FL	
Title:	TD	( ) Delete
Name:	KLYOKAWA, PETER	
Address:	329 WORTH AVE	
City-St-Zip:	PALM BEACH, FL	
Title:	SD	( ) Delete
Name:	FRANKEL, SHERRY	
Address:	256 WORTH AVENUE	
City-St-Zip:	PALM BEACH, FL 33480	

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:	TD	(X) Change ( ) Addition
Name:	KIYOKAWA, PETER	
Address:	329 WORTH AVE	
City-St-Zip:	PALM BEACH, FL	
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: KATHY BUSH RA 07/06/2005
Electronic Signature of Signing Officer or Director — Date