

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90069 019 ****61.25

DOCUMENT # 751519	
1. Entity Name WORTH AVENUE ASSOCIATION, INC.	

Principal Place of Business 329 WORTH AVENUE PO BOX 2126 PALM BEACH, FL 33480	Mailing Address PO BOX 2126 PALM BEACH, FL 33480
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01092006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-2088930	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BUSH, KATHY 4552 BROOK DR WEST PALM BEACH, FL 33417		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 *Kathy Bush* DATE 1/9/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SCHWALBERG, MARTIN	NAME	
STREET ADDRESS	329 WORTH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RIEHTER, STEFAN	NAME	
STREET ADDRESS	224 WORTH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL	CITY-ST-ZIP	
TITLE	P ☐ Delete	TITLE	PAST PRESIDENT ☒ Change ☐ Addition
NAME	KASSATLY, ED	NAME	
STREET ADDRESS	250 WORTH AVE	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL	CITY-ST-ZIP	
TITLE	TD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KIYOKAWA, PETER	NAME	
STREET ADDRESS	329 WORTH AVE	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FRANKEL, SHERRY	NAME	
STREET ADDRESS	256 WORTH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	
TITLE	PRESIDENT ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	JAN KRANICH	NAME	
STREET ADDRESS	440 S. COUNTY ROAD	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP	

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: *[Signature]* Date 1/12/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR