


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90050 033 ****70.00

DOCUMENT # 756683

1. Entity Name
BIG BROTHERS/BIG SISTERS OF PALM BEACH COUNTY, INC.



Principal Place of Business
 2112 CONGRESS AVE SOUTH
 SUITE 200
 WEST PALM BEACH, FL 33406 US

Mailing Address
 2112 CONGRESS AVE SOUTH
 SUITE 200
 WEST PALM BEACH, FL 33406 US

2. Principal Place of Business - No P.O. Box #
1605 PALM BEACH LAKES BLVD
 Suite, Apt. #, etc.
B-550

3. Mailing Address
1605 PALM BEACH LAKES BLVD
 Suite, Apt. #, etc.
B-550

City & State
WEST PALM BEACH, FL

City & State
WEST PALM BEACH, FL

Zip
33401 Country
USA

Zip
33401 Country
USA



03052007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2078576

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

KALY, TERRY LEE
2708 RAVELLA WAY
PALM BEACH GARDENS, FL 33410

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

Filing Fee is \$81.25 Due by May 1, 2007

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 NAME STREET ADDRESS CITY-ST-ZIP	CEO KALY, TERRY LEE 2708 RAVELLA WAY PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR TROUTMAN, TIMOTHY 1611 OAK BERRY CIRCLE WELLINGTON, FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SLEUMAN, NANCY 7830 NILE RIVER ROAD WEST PALM BEACH, FL 33411	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECD FRANCINE, NELSON 13115 BEL HAVEN COURT #23 WELLINGTON, FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD JOHN, APGAR 2870 NE 26TH STREET FT LAUDERDALE, FL 33305	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD DAVID, GREENE 5407 SUNSEEKER BLVD GREENACRES, FL 33463	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES GREENE, DAVID 5407 SUNSEEKER BLVD GREENACRES, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD O'BRIEN, ROBERT 3090 WINDSOR CIRCLE BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: *Terry L Kaly* **03-20-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #