## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#766110** 

Apr 08, 2006 Secretary of State

Entity Name: PALM BEACH MONTHLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS, INC.

**Current Principal Place of Business:** New Principal Place of Business:

823 NORTH 823 NORTH A STREET

LAKE WORTH, FL 334602424 LAKE WORTH, FL 334602424

**Current Mailing Address: New Mailing Address:** 

823 NORTH 823 NORTH A STREET

LAKE WORTH, FL 334602424 LAKE WORTH, FL 334602424

FEI Number: 59-6546499 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CALDWELL, ELEANOR 519 AZURE AVE WELLINGTON, FL 33414

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:

Date

Electronic Signature of Registered Agent

US

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete LUSTBADER, ROBERT LUSTBADER, ROBERT Name: Name:

3334 JOG PARK DR Address: 3334 JOG PARK DR Address: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

SLITOR, JAMES Name: DEVINE, ANNE Name: Address: 9122 SE ELDORADO WAY Address: 509 18TH AVE City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: () Change () Addition

CALDWELL, ELEANOR Name: Name:

Address: 519 AZURE AVE Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: COOLICAN, SHAUNA Name: COOLICAN, SHAUNA 1629 S LAKESIDE DR 1629 S LAKESIDE DR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463

Title: () Delete Title: (X) Change ( ) Addition

SLITOR, SHERRY CARNEY, JOAN Name: Name: 9122 SE ELDORADO WAY 59 PLANTATION BLVD Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: (X) Change ( ) Addition

MODELL, JAVIER MODELL, KAREN Name: Name:

Address: 300 WATERWAY DR. S 404 Address: 300 WATERWAY DR. S 404 LANTANA, FL 33462 LANTANA, FL 33462 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ELEANOR CALDWELL Т 04/08/2006