# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 17, 2009**
**Secretary of State**

DOCUMENT# F94000002761

**Entity Name:** CONFRERIE DE LA CHAINE DES ROTISSEURS BAILLIAGE DE PALM BEACH, INC.

**Current Principal Place of Business:**

205 WORTH AVENUE
SUITE 312
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

205 WORTH AVENUE
SUITE 312
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number: 22-3335680** **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:**

CASTELLANO, BRENDA N
205 WORTH AVENUE
SUITE 312
PALM BEACH, FL 33480 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: P ( ) Delete
Name: CASTELLANDO, BRENDA N
Address: 205 WORTH AVENUE
City-St-Zip: PALM BEACH, FL 33480

Title: VD ( ) Delete
Name: GILBERT, BARBARA
Address: 205 WORTH AVENUE
City-St-Zip: PALM BEACH, FL 33480

Title: VD ( ) Delete
Name: BOWDEN, ELIZABETH
Address: 100 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: PONTON, DANIEL
Address: 215 PERUVIAN AVE
City-St-Zip: PALM BCH, FL

**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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRENDA N CASTELLANO P 07/17/2009
Electronic Signature of Signing Officer or Director — Date