## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000002761

FILED May 27, 2010 Secretary of State

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

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

205 WORTH AVENUE TRUMP PLAZA 529 SOUTH FLAGLER DRIVE

SUITE 312 NO 7E/F

PALM BEACH, FL 33480 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

205 WORTH AVENUE TRUMP PLAZA 529 SOUTH FLAGLER DRIVE

SUITE 312 NO 7E/F

PALM BEACH, FL 33480 WEST PALM BEACH, FL 33401

FEI Number: 22-3335680 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

CASTELLANO, BRENDA N WECHSLER, LOUIS G
205 WORTH AVENUE TRUMP PLAZA 529 SOLITH FLAGLER DRIVE

205 WORTH AVENUE TRUMP PLAZA 529 SOUTH FLAGLER DRIVE SUITE 312 NO 7 E/F

PALM BEACH, FL 33480 US WEST PALM BEACH, FL 33401 US

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: LOUIS G. WECHSLER 05/27/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: WECHSLER, LOUIS G

Address: TRUMP PLAZA 529 SOUTH FLAGLER DRIVE NO7E/F

City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD

Name: LEHRMAN, SUSAN M

Address: TRUMP PLAZA 529 SOUTH FLAGLER DRIVE NO7E/F

City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD

Name: BOWDEN, ELIZABETH
Address: 100 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title:

Name: ARLETTE, GORDON
Address: 980 NORTH LAKE WAY
City-St-Zip: PALM BCH, FL 33480

I hereby 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 all other like empowered.

SIGNATURE: LOUIS G. WECHSLER PRES 05/27/2010