

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J72327

FILED
Jan 25, 2006
Secretary of State

Entity Name: SUMMA INVESTMENT CLUB OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

11702 NORTH LAKE DRIVE
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

C/O PEGGY SMITH
69 SPANISH RIVER DR.
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 59-2794372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, KAREN
11702 NORTH LAKE DRIVE
BOYNTON BEACH, FL 33436 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PORTER, ZEL
Address: 4765 SHERWOOD
City-St-Zip: DELRAY BEACH, FL 33445

Title: S () Delete
Name: ZLOCZOVER, GINNY
Address: 801 SW 34TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T () Delete
Name: KIENTZY, MARY
Address: 12730 OAK ARBOR DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: SCALZI, DOREEN
Address: 3586 ROYAL TERN CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCALZI, DOREEN
Address: 3586 ROYAL TERN CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436

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

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

Title: VP (X) Change () Addition
Name: ALALU, FRIMI
Address: 2150 S OCEAN BLVD, APT 2E
City-St-Zip: DELRAY BEACH, FL 33483

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOREEN SCALZI

P

01/25/2006

Electronic Signature of Signing Officer or Director

_____ Date