

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jan 10, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # J76510**

1. Entity Name  
**PALM BEACH DIRECTIONS, INC.**



Principal Place of Business  
**417 PRIMAVERA AVE  
PALM BEACH, FL 33480 US**

Mailing Address  
**417 PRIMAVERA AVE  
PALM BEACH, FL 33480 US**



01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2822224**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**SCHERER, BRADLEY A  
303 BANYAN  
STE 401  
WEST PALM BEACH, FL 33401**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	VP-D
NAME	SCHERER, ALLAN D.
STREET ADDRESS	417 PRIMAVERA WAY
CITY-ST-ZIP	PALM BEACH, FL 33480
TITLE	PR-D
NAME	SCHERER, MARGARET S.
STREET ADDRESS	417 PRIMAVERA WAY
CITY-ST-ZIP	PALM BEACH, FL 33480
TITLE	D
NAME	SCHERER, BRAD A.
STREET ADDRESS	4656 SOUTH SHORE BLVD.
CITY-ST-ZIP	W. PALM BEACH, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000580872  
01/10/07-80055-023 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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:

*Allan D. Scherer* **ALLAN D. SCHERER**

**1-5-07**

Date

Daytime Phone #