

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K05400

FILED
Jan 05, 2005
Secretary of State

Entity Name: PALM BEACH PRODUCTS, INC.

Current Principal Place of Business:

3874 FISCAL CT.
SUITE 200
WEST PALM BEACH, FL 33404 US

New Principal Place of Business:

18770 SE RIVER RIDGE RD
TEQUESTA, FL 33469 US

Current Mailing Address:

3874 FISCAL CT.
SUITE2 200
WEST PALM BEACH, FL 33404 US

New Mailing Address:

18770 SE RIVER RIDGE RD
TEQUESTA, FL 33469 US

FEI Number: 65-0015221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ULLMAN, PAUL R
18770 SE RIVER RIDGE RD
TEQUESTA, FL 33469 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: DPT () Delete
Name: ULLMAN, PAUL R.,
Address: 18770 SE RIVER RIDGE RD
City-St-Zip: TEQUESTA, FL 33469 US

Title: VPAT (X) Delete
Name: BLOUGH, CHARLENE I
Address: 6879 NW 27TH CT
City-St-Zip: MARGATE, FL 33063 US

Title: D () Delete
Name: ULLMAN, MATTHEW S
Address: 9300 ASH HOLLOW LANE
City-St-Zip: CENTERVILLE, OH 45458 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: ULLMAN, PAUL R
Address: 18770 SE RIVER RIDGE RD
City-St-Zip: TEQUESTA, FL 33469 US

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 for the exemption stated in Section 119.07(3)(i), 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: PAUL R. ULLMAN

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

Date