FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Daytima Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # K72585

'2585 (8<u>)</u>

PROFESSIONAL RESOURCES OF THE PALM BEACHES, INC.

Principal Place of Business Mailing Address					# PAGNIDIN BIL IDDIR HARA BURN TANDI DINI BISH DINI ANDIN ANDIN BIBN BIRIL IDDI			
2833 LANTANA RD OFFICE 5 LANTANA FL 33462 US		2633 LANTANA ROAD SUITE 30 LANTANA FL 33462-2480 US						
				3. Date Incorporated or Qualified 03/14/1989	03/14/1989 06/17/1996			
<u>'</u>	Nace of Business	2a. Mailing Address			4. FEI Number	} \	Applied For	
Suite, Apt	# old	Suite, Apt. #, etc.			65-0112347		Not Applicable 5 Additional	
22	π, οιο	27			5. Certificate of Status Desired		Required	
City & Stat	е	City & State			6. Election Campaign Financing	\$5.0	00 May Be	
23		28	, 		Trust Fund Contribution	☐ Adde	ed to Fees	
Zip	Country	Zip	Countr	У	8. This corporation has liability for		rs. 199.032,	
24	25 9. Name and Address of Curre	nt Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No		
THO	OMPSON, M.LEE P.A.	itt ribgistoreal rigorit	81	Name	10. Italia and reading of the first	34-4-4		
	8 FOREST HILL BOULEVARD		-	N C+ A	(D.O. Day M. John S. Alad Accessed	-1-3		
	ST PALM BEACH FL 33406		82	Street Add	fress (P.O. Box Number is Not Acceptal) 		
			8:	3				
			84	City		85 Zi	ip Code	
						FL		
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statu	ites, the abor	ve-named cor	poration submits this statement for the ation's board of directors. I hereby acce	ourpose of changing	g its registered	
agent Fa	am familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statute	es.		рт сто арропитот	as regrets es	
SIGNATURE	Slorature, typed or printed name of registered as					DATE		
12.		NO DIRECTORS	13.	gent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFI		ORS IN 12	
TITLE	PSTD	DELETE	1.1 THLE			☐ Chang		
NAME	SHAW, JIMMY R		1.2 NAME					
STREET ADDRESS	12724 WESTPORT CIRCLE		1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL 3341	2	1.4 City	ST-ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE			Chang	ge Addition	
NAME	SHAW, TIMOTHY L		2.2 NAME					
STREET ADDRESS	15160 SCOTT PLACE			ET ADDRESS				
CITY - ST - ZIP	LOXAHATCHEE FL 33470	DELETE	2.4 CITY			Chang	e Addition	
TITLE		T-) perest	31 TITLE	t		L CHANG	e 🗀 Audillon	
NAME STREET ADDRESS			3.2 NAMI	ET ADDRESS				
CITY-ST-7/P			3 3 3 THE					
TITLE		DELETE	4.1 TITLE			☐ Chang	ge Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS			•	
CITY-ST-ZIP			4.4 CITY	ST-ZIP				
TITLE		DELETE	. 5.1 TITLE			Chang	ge 🔲 Addition	
NAME			5.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY -			Chang	ge Addition	
TITLE		F" Detrig	6.2 NAM			L'1 cuant	№ 110 MOUITON	
NAME STREET ADDRESS				et address				
City-St-Zip			5.4 CITY					
14. I do here	by certify that the information supplie	ed with this filing does not qua	lify for the ex	emption state	ed in Section 119.07(3)(i), Florida Statut	es. I further certify the	hat the	
information Lam an c appears	on indicated on this annual report or officer or director of the corporation of in Block 12 or Block 18 h changed, i	supplemental annual report is or the receivor or trustee empo or on an attachment with an ac	true and aco wered to exe ddress.	curate and that ecute this repo	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as if made Statutes; and that m	under oath; that ny name	

SIGNATURE: