2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002133

FILED Feb 21, 2005 Secretary of State

Entity Name: PALM BEACH COUNTY AMATEUR RADIO EMERGENCY SERVICE, INC.

C	rinainal Blaca	of Duning		New Principal	Nose of Busines		
Current P	rincipal Place	or Busine	ess:	New Principal i	Place of Busines	SS:	
	UTHERN BLVD ALM BEACH, FL		US	11985 SOUTHE ROYAL PALM B		US	
Current Mailing Address:				New Mailing Ad	New Mailing Address:		
	UTHERN BLVD ALM BEACH, FL		US	11985 SOUTHE ROYAL PALM B	RN BLVD. # 285 EACH, FL 33411	US	
FEI Number:	: 65-0995658	FEI Numb	per Applied For ()	FEI Number Not Applicable	() Certifica	te of Status Desired ()	
Name and	Address of C	urrent Re	gistered Agent:	Name and Add	ess of New Reg	istered Agent:	
SMYTH, SEAN F 1098 NW BOCA RATON BLVD BOCA RATON, FL 33432 US				9071 PIĆOT CT	SMYTH, SEAN F 9071 PICOT CT BOYNTON BEACH, FL 33437 US		
	named entity s e of Florida.	ubmits thi	s statement for the	purpose of changing its reg	istered office or re	egistered agent, or both,	
SIGNATURE:							
SIGNATU	RE:				0:	2/21/2005	
SIGNATU		c Signatuı	re of Registered Ag	ent		2/21/2005 Date	
		-	re of Registered Ag				
OFFICER: Title: Name: Address:	Electroni S AND DIRECT	ORS:				Date	
	Electroni S AND DIRECT VD () SMYTH, SEAN 9071 PICOT CT BOYNTON BEAC	CH, FL 334: Delete CHOUSE THE STATE	285	ADDITIONS/CH Title: Name: Address:	ANGES TO OFF	Date FICERS AND DIRECTOR	
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	Electroni S AND DIRECT VD () SMYTH, SEAN 9071 PICOT CT BOYNTON BEAC PD () MESSINGER, DA 11985 SOUTHEI ROYAL PALM B	CH, FL 3343 Delete AVID RN BLVD. # EACH, FL 3 Delete NORTH	285	ADDITIONS/CH Title: Name: Address: City-St-Zip: Title: Name: Address:	ANGES TO OFF	Date FICERS AND DIRECTOR: () Addition () Addition	

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

SIGNATURE: JOHN SHEATS SD 02/21/2005