2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002754

FILED Apr 08, 2008 Secretary of State

Entity Name: MUNICIPAL PUBLIC SAFETY COMMUNICATIONS CONSORTIUM OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 260 ORANGE TREE DRIVE ATLANTIS, FL 33462 **Current Mailing Address: New Mailing Address:** 260 ORANGE TREE DRIVE ATLANTIS, FL 33462 FEI Number: 52-2263499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANGOLD, ROBERT 260 ORANGE TREE DRIVE ATLANTIS, FL 33462 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MANGOLD, ROBERT Name: Name: 260 ORANGE TREE DRIVE Address: Address: City-St-Zip: ATLANTIS, FL 33462 City-St-Zip: Title: () Delete Title: VCD (X) Change () Addition REITER, CHIEF MICHAEL Name: CAMBISIOS, MICHAEL Name: Address: PALM BEACH POLICE 345 S. COUNTY RD. Address: 600 BANYAN BLVD. City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33401 Title: () Delete Title: (X) Change () Addition ATALLAH, WADIE MANEY, BONNIE Name: Name: 5985 10TH AVE. NORTH 345 S. COUNTY ROAD Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: PALM BEACH, FL 33480 Title: TD () Delete Title: TD (X) Change () Addition CARR, ERNIÈ CARR, ERNIÈ Name: Name: 10500 N MILITARY TR Address: Address: 10500 N. MILITARY TR. City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: () Delete Title: (X) Change () Addition KNIGHT, JAMES CANFIELD, STEVE Name: Name: 560 US HWY 1 560 US HWY 1 Address: Address: NORTH PALM BEACH, FL 33408 City-St-Zip: City-St-Zip: NORTH PALM BEACH, FL 33408 Title: () Delete Title: () Change () Addition RUNDLE, ANDY Name: Name: Address: 500 GREYNOLDS CIR Address: LAKE WORTH, FL 33462 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DRICTOR ERNIE CARR D 04/08/2008