

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004879

FILED
Jan 27, 2009
Secretary of State

Entity Name: PALM BEACH GUARDIANSHIP ASSOCIATION, INC.

Current Principal Place of Business:

710 FIRST AVE S
LAKE WORTH, FL 33460

New Principal Place of Business:

710 FIRST AVENUE SOUTH
LAKE WORTH, FL 33460

Current Mailing Address:

710 FIRST AVE S
LAKE WORTH, FL 33460

New Mailing Address:

710 FIRST AVENUE SOUTH
LAKE WORTH, FL 33460

FEI Number: 65-1048294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURTIS, ROGERS
710 FIRST AVE SOUTH
LAKE WORTH, FL 33460 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EAKIN, LEE
Address: 1674 ROY DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VPD () Delete
Name: POLNY, KAREN
Address: 9770 SOUTH MILITARY TR B7 #202
City-St-Zip: BOYNTON BEACH, FL 33463

Title: SD () Delete
Name: SCHOOLMASTER, CINDY
Address: 4760 JOG RD
City-St-Zip: GREENACRES, FL 33467

Title: TD () Delete
Name: ROGERS, CURTIS
Address: 710 FIRST AVE S
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CURTIS ROGERS

TD

01/27/2009

Electronic Signature of Signing Officer or Director

Date