

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007410

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** ROYAL PALM BEACH INDUSTRIAL PARK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8135 LAKE WORTH RD  
SUITE B  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

8135 LAKE WORTH RD  
SUITE B  
LAKE WORTH, FL 33467

**New Mailing Address:**

**FEI Number:** 65-1055102

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COLMAN, NANCY B ESQ  
1075 BROKEN SOUND PKWY. NE  
SUITE 102  
BOCA RATON, FL 33487 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: PECHTER, MARTIN  
Address: 751 PARK OF COMMERCE DRIVE SUITE 128  
City-St-Zip: BOCA RATON, FL 33487

Title: VSTD ( ) Delete  
Name: PECHTER, JEFFREY  
Address: 8135 LAKE WORTH RD STE B  
City-St-Zip: LAKE WORTH, FL 33467

Title: CFOD ( ) Delete  
Name: BLOCK, STEVE  
Address: 8135 LAKE WORTH RD STE B  
City-St-Zip: LAKE WORTH, FL 33467

**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:

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: STEPHEN BLOCK

CFOD

01/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date