2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005959

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Entity Name: CLEAN UP PALM BEACH COUNTY, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
4040 COLLIN DR W PALM BCH, FL 33406					
Current Mailing Address:				New Mailing Address:	
4040 COLLIN DR W PALM BCH, FL 33406					
FEI Number:	01-0726235	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ALVARO, JOHN 680 NE 15 PL BOYNTON BCH, FL 33435 US					
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:	
Title: Name: Address: City-St-Zip:	D () ALVARO, JOHN 680 NE 15 PL BOYNTON BCH			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () CAVANAUGH, I 440 INGLEWOO PALM SPRING	OD DR		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () CAMPBELL, HA 7525 ALPHA C' W PALM BCH,	Г., EAST		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () GIDDENS, RON 1616 S MILITAI W PALM BCH,	RY TRAIL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SCHERER, MIC 4040 COLLIN D			Title: Name: Address: City-St-Zip:	() Change () 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: MICHAEL SCHERER PRES 04/27/2004