## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000007255

City-St-Zip:

Entity Name: PALM BEACH FILM SOCIETY, INC.

FILED Apr 13, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2301 S. CONGRESS AVE. APT.221 BOYNTON BEACH, FL 33426 US **New Mailing Address: Current Mailing Address:** 222 LAKEVIEW AVE. 2301 S. CONGRESS AVE. #221 STE. 160-236 BOYNTON BEACH, FL 33426 US WEST PALM BEACH, FL 33401 US FEI Number: 20-0795051 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCKNIGHT, HEATH W 2301 S. CONGRESS AVE. APT. 221 BOYNTON BEACH, FL 33426 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: (X) Change ( ) Addition () Delete MCKNIGHT, HEATH W MCKNIGHT, HEATH W Name: Name: 2301 S. CONGRESS AVE., APT. 221 0 0 APT. 22 1 Address: 2301 S. CONGRESS AVE., APT. 221APT. 221 Address: City-St-Zip: BOYNTON BEACH, FL 33426 US City-St-Zip: BOYNTON BEACH, FL 33426 US Title: Title: D (X) Change ( ) Addition () Delete JINKS, DEVIN Name: JINKS, DEVIN Name: Address: 222 LAKEVIEW AVE. #160-236 Address: 5920 PINEY CT. City-St-Zip: WEST PALM BEACH, FL 33426 US City-St-Zip: LAKE WORTH, FL 33463 US Title: () Delete Title: (X) Change ( ) Addition SMITH, DONNA SMITH, DONNA Name: Name: 222 LAKEVIEW AVE. #160-236 2301 S. CONGRESS AVE. #221□□ Address: Address: City-St-Zip: WEST PALM BEACH, FL 33426 US City-St-Zip: BOYNTON BEACH, FL 33426 US Title: () Delete Title: () Change () Addition Name: MCKNIGHT, CELIA Name: 1001 MOURNING DOVE LANE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition DASHIELL, ELIZABETH Name: Name: 410 FOURTH CT. Address: Address:

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.

City-St-Zip:

SIGNATURE: HEATH MCKNIGHT P 04/13/2004

PALM BEACH GARDENS, FL 33410