2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N02000007255

Entity Name: PALM BEACH FILM SOCIETY, INC.

Current Principal Place of Business:

12260 SAG HARBOR CT.
6
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

4512 NORTH FLAGLER DRIVE
201A
WEST PALM BEACH, FL 33407 US

New Mailing Address:

220 SUNRISE AVENUE
100
PALM BEACH, FL 33480 US

FEI Number: 20-0795051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKNIGHT, HEATH W P
12260 SAG HARBOR CT.
6
WELLINGTON, FL 33414 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: P ( ) Delete
Name: MCKNIGHT, HEATH W P
Address: 12260 SAG HARBOR CT. #6
City-St-Zip: WELLINGTON, FL 33414 US

Title: D ( ) Delete
Name: JINKS, DEVIN D
Address: 5920 PINEY CT.
City-St-Zip: LAKE WORTH, FL 33463 US

Title: S ( ) Delete
Name: SMITH, DONNA S
Address: 4512 NORTH FLAGLER DRIVE, STE. 201A
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: T ( ) Delete
Name: GULDEN, HILLARY H T
Address: 4512 NORTH FLAGLER DRIVE, STE. 201A
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP ( ) Delete
Name: DASHIELL, ELIZABETH VP
Address: 410 FOURTH CT.
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: PAIN, MARK D
Address: 230 PINE TERRACE
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: S (X) Change ( ) Addition
Name: STONE, JENNIFER M S
Address: 11208 88TH ROAD NORTH
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: T (X) Change ( ) Addition
Name: GULDEN, HILLARY H T
Address: 220 SUNRISE AVENUE, STE 100
City-St-Zip: PALM BEACH, FL 33480

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: HEATH MCKNIGHT P 04/30/2007

Electronic Signature of Signing Officer or Director — Date