


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90028 047 ****61.25

DOCUMENT # N03000002250							
1. Entity Name WORLD AFFAIRS COUNCIL OF THE FLORIDA PALM BEACHES, INC.							
Principal Place of Business 150 BANYAN ISLE DRIVE PALM BEACH GARDENS, FL 33418-4601			Mailing Address 150 BANYAN ISLE DRIVE PALM BEACH GARDENS, FL 33418-4601				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State			City & State				
Zip	Country	Zip	Country	4. FEI Number 05-0556615			
				Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
WHEELOCK, WILLIAM E 150 BANYAN ISLE DRIVE PALM BEACH GARDENS, FL 33418-4601			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees			
				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	MR.	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	WHEELOCK, WILLIAM E		NAME	SHOOSHANI, MICHAEL			
STREET ADDRESS	150 BANYAN ISLE DRIVE		STREET ADDRESS	9045 LaFontana Suite 60A			
CITY-ST-ZIP	PALM BEACH GARDENS, FL 334184601		CITY-ST-ZIP	BOCA RATON, FL 33434			
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	WHEELOCK, JUDITH J		NAME	WALSH, MICHAEL			
STREET ADDRESS	150 BANYAN ISLE DRIVE		STREET ADDRESS	200 33 OCEAN KEY DRIVE			
CITY-ST-ZIP	PALM BEACH GARDENS, FL 334184601		CITY-ST-ZIP	BOCA RATON, FL 33498			
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	PATTERSON, GERALD D		NAME	BROWN, PERRY			
STREET ADDRESS	2974 NEEDHAM CT		STREET ADDRESS	440 ROYAL PALM WAY			
CITY-ST-ZIP	DELRAY BEACH, FL 33445		CITY-ST-ZIP	PALM BEACH, FL 33480			
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	O'CONNELL, DAN		NAME	BROWNE, JOHN			
STREET ADDRESS	4977 VICTORIA CIRCLE		STREET ADDRESS	P.O. Box 408			
CITY-ST-ZIP	WEST PALM BEACH, FL 33409		CITY-ST-ZIP	PALM BEACH, FL 33480			
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BAZZONE, ROBERT		NAME	WALSH, KAT			
STREET ADDRESS	3529 PALLADIAN CIRCLE		STREET ADDRESS	2325 ULMERTON ROAD			
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	CLEARWATER, FL 33762			
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	COMRAS, VICTOR		NAME				
STREET ADDRESS	2601 NE 12TH ST		STREET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE, FL 33304		CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u>William E. Wheelock</u>		WHEELock, WILLIAM E. WHEELOCK		1-17-05 561-622-2182			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>			