

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004414

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** PALM BEACH SCHOOL FOR AUTISM, INC.

**Current Principal Place of Business:**

1199 WEST LANTANA ROAD  
COTTAGE #16, #18 & #19  
LANTANA, FL 33462

**New Principal Place of Business:**

**Current Mailing Address:**

1199 WEST LANTANA ROAD  
COTTAGE #16, #18 & #19  
LANTANA, FL 33462

**New Mailing Address:**

**FEI Number:** 05-0571797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEGATO, LOUISA M  
1199 WEST LANTANA ROAD  
COTTAGE #16 & #19  
LANTANA, FL 334621514 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:** PRES  
**Name:** GABRIEL, RANDEE  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #19  
**City-St-Zip:** LANTANA, FL 33462

**Title:** VP  
**Name:** D'AMATO, DAWN  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #19  
**City-St-Zip:** LANTANA, FL 33462

**Title:** TREA  
**Name:** MENOR, RUTH  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #16 & #19  
**City-St-Zip:** LANTANA, FL 33462

**Title:** DIRE  
**Name:** ZEL, JEROME  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #16 & #19  
**City-St-Zip:** LANTANA, FL 33462

**Title:** DIRE  
**Name:** CARROLL, STEVE  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #16 & #19  
**City-St-Zip:** LANTANA, FL 33462

**Title:** DIRE  
**Name:** BUCHER, LLOYD  
**Address:** 1199 WEST LANTANA ROAD, COTTAGE #16 & #19  
**City-St-Zip:** LANTANA,, FL 33462

I hereby 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 all other like empowered.

**SIGNATURE:** RANDEE GABRIEL

PRES

04/26/2010

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

\_\_\_\_\_  
Date