2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004159

FILED Apr 30, 2007 Secretary of State

Entity Name: THE PALM BEACH MUSEUM OF NATURAL HISTORY, INC.

Current Principal Place of Business: New Principal Place of Business: 2805 EAST OAKLAND PARK BLVD 402 FORT LAUDERDALE, FL 33306 **New Mailing Address: Current Mailing Address:** 2805 EAST OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306 FEI Number: 06-1745912 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: BATTS, NORLIZA ESQUIRE 2805 EAST OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306 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 PASCUCCI, JR., RUDOLPH F PASCUCCI, JR., RUDOLPH F Name: Name: 3200 PALM TRACE LANDINGS DRIVE Address: 3200 PALM TRACE LANDINGS DRIVE, #912 Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: **DAVIE, FL 33314** Title: () Delete Title: (X) Change () Addition CICHOCKI, FREDERICK DR. Name: Name: CICHOCKI, FREDERICK DR. Address: 750 NW 6TH DRIVE Address: **67 PEARL STREET** City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BATH, ME 04530 Title: () Delete Title: () Change () Addition FERDINANDO, PETER Name: Name: 888 NW 45TH STREET Address: Address: City-St-Zip: POMPANO, FL 33064 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FLYNN, PATRICA K Name: 2805 EAST OAKLAND PARK BLVD, #402 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33306 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: RUDOLPH PASCUCCI PRES 04/30/2007