

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 23, 2009  
Secretary of State**

DOCUMENT# N05000004292

Entity Name: P.C.A.D.B. ASSOCIATION, INC.

**Current Principal Place of Business:**

2737 S CLEARBROOK CIR  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

2737 S CLEARBROOK CIR  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number: 20-2824988      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRANCO, DIANE  
2737 S CLEARBROOK CIR  
DELRAY BEACH, FL 33445      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: PSTD      ( ) Delete  
Name: FRANCO, DIANE  
Address: 2737 S CLEARBROOK CIR  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD      ( ) Delete  
Name: HASNER, LLOYD  
Address: 2737 S CLEARBROOK CIR  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D      ( ) Delete  
Name: KASTEN AKER, ANN G  
Address: 1445 NW BOCA RATON BLVD  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: DIANE FRANCO

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date