

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 8:00 am
Secretary of State

01-10-2007 90048 032 ****70.00

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1. Entity Name
SENIOR LIFESTYLES INTELLIGENT TALK RADIO, INC.



Principal Place of Business
**1597 JEAGA DR
JUPITER, FL 33458-8726**

Mailing Address
**1597 JEAGA DR
JUPITER, FL 33458-8726**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
20-2823943

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KAUFFMAN, RONALD S
1597 JEAGA DR
JUPITER, FL 33458-8726**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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 PCEO ☐ Delete
NAME KAUFFMAN, RONALD S
STREET ADDRESS 1597 JEAGA DR
CITY-ST-ZIP JUPITER, FL 334588726

TITLE **D** ☐ Change ☒ Addition
NAME **VATTIATO, PAUL**
STREET ADDRESS **8541 Golden Cypress Ct.**
CITY-ST-ZIP **Lake Worth, FL 33467**

TITLE V/D ☐ Delete
NAME MERRITT, JANE
STREET ADDRESS 10094 W. INDIANTOWN RD
CITY-ST-ZIP JUPITER, FL 33478

TITLE **C** ☐ Change ☒ Addition
NAME **Todd Zellen**
STREET ADDRESS **955 NW 17th Ave. Bldg. C**
CITY-ST-ZIP **Delray Beach, FL 33445**

TITLE S/T ☐ Delete
NAME WINZELL, NANETTE
STREET ADDRESS 5725 CORPORATE WAY., STE. 101
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ESTREMER-FITZGERALD, JAIME
STREET ADDRESS 1764 N. CONGRESS AVE., STE. 201
CITY-ST-ZIP WEST PALM BEACH, FL 33409

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **PAFFORD, MARK**
STREET ADDRESS **4700 N. CONGRESS AVE., STE. 101**
CITY-ST-ZIP **WEST PALM BEACH, FL 33407**

TITLE **D** ☒ Change ☐ Addition
NAME **PAFFORD, MARK**
STREET ADDRESS **4700 N. Congress Ave. Ste. 101**
CITY-ST-ZIP **West Palm Beach, FL 33407**

TITLE D ☐ Delete
NAME PONCY, MARNIE
STREET ADDRESS 423 FERN ST., 2ND FLOOR
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Ronald S. Kauffman **Ronald S. Kauffman** 1-9-07 561-626-4481

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #