

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010012

FILED
Mar 05, 2009
Secretary of State

Entity Name: DEMOCRATIC PROFESSIONALS COUNCIL, INC.

Current Principal Place of Business:

286 CARAVELLE DR.
JUPITER, FL 33458

New Principal Place of Business:

800 VILLAGE SQUARE XING
102
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

PO BOX 1692
JUPITER, FL 33458

New Mailing Address:

800 VILLAGE SQUARE XING
102
PALM BEACH GARDENS, FL 33410

FEI Number: 13-4304926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, BRYAN S
286 CARAVELLE DR.
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

MAHONEY, JENNIFER L
605 UPLAND ROAD
WEST PALM BEACH, FL 33401 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: JENNIFER MAHONEY

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, BRYAN S.
Address: 286 CARAVELLE DR.
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: MILLER, NORA
Address: 286 CARAVELLE DR.
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: LIPSICH, WENDI
Address: 15928 DOUBLE EAGLE TRAIL
City-St-Zip: DELRAY BEACH, FL 33446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/T (X) Change () Addition
Name: SCHOSBERT FEUER, SAMANTHA
Address: 800 VILLAGE SQUARE XING, STE 102
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P (X) Change () Addition
Name: MAHONEY, JENNIFER
Address: 800 VILLAGE SQUARE XING, STE 102
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP (X) Change () Addition
Name: MCGOVERN, MICHELLE
Address: 800 VILLAGE SQUARE XING, STE 102
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: JENNIFER MAHONEY

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03/05/2009

Electronic Signature of Signing Officer or Director

Date