

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000012474

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** NBCTS OF PALM BEACH, INC.

**Current Principal Place of Business:**

622 SOUTH RD.  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

5241 BRISATA CIRCLE  
APT F  
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

622 SOUTH RD.  
BOYNTON BEACH, FL 33435

**New Mailing Address:**

5241 BRISATA CIRCLE  
APT F  
BOYNTON BEACH, FL 33437

**FEI Number:** 72-1608956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PREDMORE, SHERI B  
622 SOUTH RD.  
BOYNTON BEACH, FL 33435 US

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

BLAKESLEE, BARBARA R  
5241 BRISATA CIRCLE  
APT F  
BOYNTON BEACH, FL 33437 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: BARBARA R. BLAKESLEE

02/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TRES  
Name: BLAKESLEE, BARBARA R  
Address: 5241 BRISATA CIR APT F  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP  
Name: EVANS, SARAH  
Address: 89 LAKE ARBOR DR  
City-St-Zip: LAKE WORTH, FL 33461

Title: PRES  
Name: PREDMORE, SHERI B  
Address: 622 SOUTH RD.  
City-St-Zip: BOYNTON BEACH, FL 33435

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: BARBARA R BLAKESLEE

TREA

02/17/2010

Electronic Signature of Signing Officer or Director

Date