

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N05000012783

1. Entity Name  
PALM BEACH COUNTY WOODTURNERS,  
INCORPORATED



06 OCT 23 10:23

Principal Place of Business  
1645 PALM BEACH LAKES BLVD.  
SUITE 450  
WEST PALM BEACH, FL 33401

Mailing Address  
1645 PALM BEACH LAKES BLVD.  
SUITE 450  
WEST PALM BEACH, FL 33401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT 11/05

4. FEI Number

☒ Applied For  
☐ Not Applicable

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

BUSO, JOHN N ESQ.  
1645 PALM BEACH LAKES BLVD.  
SUITE 450  
WEST PALM BEACH, FL 33401

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

**FILE NOW!!! FEE IS \$236.25**  
**After January 1, 2007, Fee will be \$297.50**

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME ROSENCRANTZ, BRIAN  
STREET ADDRESS 11384 56TH PLACE NORTH  
CITY-ST-ZIP ROYAL PALM BEACH, FL ☐ Delete

TITLE V  
NAME ESCHER, BUD  
STREET ADDRESS 6286 MICHAEL STREET  
CITY-ST-ZIP JUPITER, FL ☒ Delete

TITLE S  
NAME MILLS, MIKE  
STREET ADDRESS 17704 FOXGLOVE LANE  
CITY-ST-ZIP BOCA RATON, FL ☒ Delete

TITLE D  
NAME GRUNTWAGIN, AL  
STREET ADDRESS 100 LAKESHORE DRIVE #458  
CITY-ST-ZIP NORTH PALM BEACH, FL ☐ Delete

TITLE D  
NAME BUSO, JOHN N  
STREET ADDRESS 1645 PALM BEACH LAKES BLVD. #450  
CITY-ST-ZIP WEST PALM BEACH, FL 33401 ☐ Delete

TITLE D  
NAME BRULOTTE, ROBERT  
STREET ADDRESS 26 NE 11TH WAY  
CITY-ST-ZIP DEERFIELD BEACH, FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DIRECTOR ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 300081116993  
CITY-ST-ZIP 10/23/06--01042--006 \*\*236.25

TITLE DIRECTOR AND SECRETARY ☐ Change ☒ Addition  
NAME TIM CARTER  
STREET ADDRESS 401 NE. 18TH ST.  
CITY-ST-ZIP DEERFIELD BEACH, FL 33445

TITLE TREASURER ☐ Change ☒ Addition  
NAME BERNARD CAESAR  
STREET ADDRESS 2935 NE. 7TH DRIVE  
CITY-ST-ZIP BOCA RATON, FL 33431

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

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

TITLE VICE PRESIDENT ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCTOBER 20, 2006

561-689-5900

Date

Daytime Phone #