

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012783

FILED
Apr 30, 2008
Secretary of State

Entity Name: PALM BEACH COUNTY WOODTURNERS, INCORPORATED

Current Principal Place of Business:

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

New Principal Place of Business:

2161 PALM BEACH LAKES BLVD.
SUITE 301
WEST PALM BEACH, FL 33409

Current Mailing Address:

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

New Mailing Address:

2161 PALM BEACH LAKES BLVD.
SUITE 301
WEST PALM BEACH, FL 33409

FEI Number: 83-0442631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BUSO, JOHN N ESQ.
2161 PALM BEACH LAKES BLVD.
SUITE 301
WEST PALM BEACH, FL 33409 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: JOHN N. BUSO

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROSENCANTZ, BRIAN
Address: 11384 56TH PLACE NORTH
City-St-Zip: ROYAL PALM BEACH, FL

Title: D () Delete
Name: RADER, JEFFREY
Address: 401 NE 18TH STREET
City-St-Zip: DELRAY BEACH, FL 33445

Title: T () Delete
Name: CAESAR, BERNARD
Address: 2935 NE 7TH DRIVE
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: GRUNTWAGIN, AL
Address: 100 LAKESHORE DRIVE #458
City-St-Zip: NORTH PALM BEACH, FL

Title: P () Delete
Name: BUSO, JOHN N
Address: 1645 PALM BEACH LAKES BLVD. #450
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: MCDONNELL, EDWARD
Address: 11330 NW 68TH CT
City-St-Zip: PARKLAND, FL

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:

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: JOHN N. BUSO

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date