

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05906 (5)

1. Corporation Name

PALM BEACH IBM-PC USER GROUP, INC.



Principal Place of Business

2525 OLD OKEECHOBEE RD #17
W PALM BEACH FL 33409

Mailing Address

2525 OLD OKEECHOBEE RD #17
W PALM BEACH FL 33409

3. Date Incorporated or Qualified
10/29/1984

3a. Date of Last Report
03/09/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2465043

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

25

Country

29

30

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERMAN, SALLY
2525 OLD OKEECHOBEE RD #17
W PALM BCH FL 33409

81 Name

MICHELLE SHOUSHANIAN

82

Street Address (P.O. Box Number is Not Acceptable)

5653 BANANA ROAD

83

84

City

W. PALM BEACH

FL

85

Zip Code

33413

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Michelle Shoushanian

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME LUMPKIN, TOM
STREET ADDRESS 3612 ALDER DR E1
CITY-ST-ZIP W. PALM BEACH FL

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME JAMES DYKSTRA
1.3 STREET ADDRESS 4350 BEECH DR
1.4 CITY-ST-ZIP W. PALM BEACH FL 33406

TITLE VD ☐ DELETE
NAME COOK, JACK
STREET ADDRESS 318 SEQUIOIA PL
CITY-ST-ZIP W PALM BCH FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME HERMAN, SALLY
STREET ADDRESS 312 ONTARIO PLACE
CITY-ST-ZIP W. PALM BEACH FL

3.1 TITLE T ☒ Change ☐ Addition
3.2 NAME MICHELLE SHOUSHANIAN
3.3 STREET ADDRESS 5653 BANANA RD
3.4 CITY-ST-ZIP W. PALM BEACH FL 33413

TITLE S ☐ DELETE
NAME RICHARDS, SISTER ANNE
STREET ADDRESS 514 SPENCER DR
CITY-ST-ZIP LAKE WORTH FL

4.1 TITLE S ☒ Change ☐ Addition
4.2 NAME ANNE FRESOLI
4.3 STREET ADDRESS 6153 LUCERNE ST
4.4 CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE D ☐ DELETE
NAME MORELL, TIM
STREET ADDRESS 215 5TH ST 303
CITY-ST-ZIP W PALM BCH FL

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME SALLY HERMAN
5.3 STREET ADDRESS 2525 OLD OKEECHOBEE RD #17
5.4 CITY-ST-ZIP W. PALM BEACH FL 33409

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michelle Shoushanian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

407-471-5054
Daytime Phone #

CR2E037 (12/95)