

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003003

FILED  
Aug 04, 2007  
Secretary of State

**Entity Name:** THE UNFORGETTABLE FUND, INC

**Current Principal Place of Business:**

820 8TH TERRACE  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

820 8TH TERRACE  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** 20-4506729      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DOHERTY, ALLAN T  
820 8TH TERRACE  
PALM BEACH GARDENS, FL 33418      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title:      DIR      ( ) Delete  
Name:      DOHERTY, ALLAN T  
Address:      820 8TH TERRACE  
City-St-Zip:      PALM BEACH GARDENS, FL 33418

Title:      DIR      ( ) Delete  
Name:      DOHERTY, PATRICIA  
Address:      820 8TH TERRACE  
City-St-Zip:      PALM BEACH GARDENS, FL 33418

Title:      DIR      ( ) Delete  
Name:      SHEPARD, SUSAN  
Address:      4894 SOUTH KAY ST  
City-St-Zip:      PALM BEACH GARDENS, FL 33410

Title:      DIR      ( ) Delete  
Name:      KEY, DOLORES  
Address:      372 PRESTWICK CIRCLE  
City-St-Zip:      PALM BEACH GARDENS, FL 33418

Title:      DIR      ( ) Delete  
Name:      LEISSRING, MALCOLM  
Address:      888 TAFT COURT  
City-St-Zip:      PALM BEACH GARDENS, FL 33410

Title:      DIR      ( ) Delete  
Name:      WAHLESTEDT, CLAES DR  
Address:      212 AUSTRALIAN AVE  
City-St-Zip:      PALM BEACH, FL 33480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:      ( ) Change ( ) Addition  
Address:      ( ) Change ( ) Addition  
City-St-Zip:      ( ) Change ( ) Addition

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Name:      ( ) Change ( ) Addition  
Address:      ( ) Change ( ) Addition  
City-St-Zip:      ( ) Change ( ) Addition

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: ALLAN DOHERTY

DIR

08/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date