

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06378

FILED
Apr 08, 2008
Secretary of State

Entity Name: ADOPT-A-FAMILY OF THE PALM BEACHES, INC.

Current Principal Place of Business:

1712 SECOND AVENUE NORTH
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

1712 SECOND AVENUE NORTH
LAKE WORTH, FL 33460 US

New Mailing Address:

1712 SECOND AVENUE NORTH
LAKE WORTH, FL 33460 US

FEI Number: 59-2471253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIPPETT, WENDY A
1712 SECOND AVENUE NORTH
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: MARASCO, JOHN P
Address: 250 SOUTH AUSTRALIAN AVE, STE 900
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: VPD () Delete
Name: ROSENKRANCE, GARTH E
Address: 500 UNIVERSITY BOULEVARD, STE 215
City-St-Zip: JUPITER, FL 33458 US

Title: SD () Delete
Name: GOLDER, NANCY B
Address: 7603 PALM ROAD
City-St-Zip: LAKE CLARKE SHORES, FL 33406 US

Title: TD () Delete
Name: ROUSE, DEBORAH
Address: 1803 SOUTH CLUB DRIVE
City-St-Zip: WELLINGTON, FL 33414 US

Title: D () Delete
Name: CASTRONUOVO, JOHN C
Address: 3601 PGA BOULEVARD, STE 200
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: MYLES, TEQUISHA Y ESQ.
Address: 423 FERN STREET, STE 200
City-St-Zip: WEST PALM BEACH, FL 33401 US

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

Title: D (X) Change () Addition
Name: CASTRONUOVO, JOHN C
Address: 440 ROYAL PALM WAY, 3RD FLOOR
City-St-Zip: PALM BEACH, FL 33480 US

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 P. MARASCO

PD

04/08/2008

Electronic Signature of Signing Officer or Director

Date