

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008282

FILED
Apr 22, 2009
Secretary of State

Entity Name: TALL CLUB OF THE PALM BEACHES, INC.

Current Principal Place of Business:

1105 LAKESHORE DRIVE UNIT 202
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

1105 LAKESHORE DRIVE UNIT 202
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: 22-3968802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RUSS, DONALD E
1105 LAKESHORE DRIVE UNIT 202
LAKE PARK, FL 33403 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: V () Delete
Name: BOBO, ALEXANDRA
Address: PO BOX 32875
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: P (X) Delete
Name: LORENZ, REMY
Address: 805 SW 1ST COURT
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP () Delete
Name: RUSS, DONALD R
Address: 1105 LAKESHORE DRIVE UNIT 202
City-St-Zip: LAKE PARK, FL 33403

Title: T () Delete
Name: RODRIGUEZ, MARY
Address: 8273 FRESH CREEK
City-St-Zip: WEST PALM BEACH, FL 33411

Title: S () Delete
Name: WENDE, ROBYN
Address: 4300 S US H-#203
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOBO, ALEXANDRA
Address: PO BOX 32875
City-St-Zip: PALM BEACH GARDENS, FL 33420

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: S (X) Change () Addition
Name: WENDE, ROBYN
Address: 4300 SOUTH US HWY 1 - #203
City-St-Zip: JUPITER, FL 33477

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: MARY RODRIGUEZ

T

04/22/2009

Electronic Signature of Signing Officer or Director

Date