

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010795

FILED  
Jan 26, 2011  
Secretary of State

**Entity Name:** WEST PALM BEACH DOWNTOWN NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

301 CLEMATIS STREET  
SUITE 200  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

315 HIBISCUS ST.  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number:** 26-1371615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCPHILLIPS, KATHLEEN J  
315 HIBISCUS STREET  
WEST PALM BEACH, FL 33401 US

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

MCPHILLIPS, KATHLEEN J CPA  
315 HIBISCUS STREET  
WEST PALM BEACH, FL 33401 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: KATHLEEN J MCPHILLIPS

01/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: FOWLKES, CLINT  
Address: 801 SOUTH OLIVE AVE. #1506  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP  
Name: KATZEN, BOB  
Address: 525 SOUTH FLAGLER DRIVE TH 5F  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TR  
Name: MCPHILLIPS, KATHLEEN J  
Address: 315 HIBISCUS STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S  
Name: LANDERYOU, SUSAN  
Address: 255 EVERNIA STREET #906  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: COX, JEANNENE  
Address: 255 EVERNIA STREET #1105  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: PINCUS, HOWARD  
Address: 610 CLEMATIS STREET #410  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN J MCPHILLIPS

TR

01/26/2011

Electronic Signature of Signing Officer or Director

Date