2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# N09000003467

Entity Name: PALMS CENTER FOR THE ARTS, INC.

Current Principal Place of Business:

501 N.W. 1ST AVENUE
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3733
HALLANDALE, FL 33008

New Mailing Address:

FEI Number: 94-3475245 **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:

BROWN, DEBORAH R
712 N.W. 9TH CT.
HALLANDALE, FL 33009 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: PRES
Name: BROWN, DEBORAH R
Address: 712 N.W.9TH COURT
City-St-Zip: HALLANDALE, FL 33009

Title: VPRE
Name: RABIN, STEWART
Address: 400 LESLIE DRIVE #506
City-St-Zip: HALLANDALE, FL 33009

Title: DIR
Name: HOCH, ESTHER
Address: 132 NE. 8TH STREES
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DIR
Name: BROWN, JOSH
Address: 657 N.W. 9TH CT.
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: ADM
Name: MARAGH, RON
Address: 5550 MADISON STREET
City-St-Zip: HOLLYWOOD, FL 33023

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: DR. DEBORAH R. BROWN DIR 05/04/2010
Electronic Signature of Signing Officer or Director Date