

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12892

FILED
May 04, 2009
Secretary of State

Entity Name: PALM BEACH HOUNDS, INC.

Current Principal Place of Business:

8415 BRIDLE PATH
BOCA RATON, FL 33496 US

New Principal Place of Business:

Current Mailing Address:

8415 BRIDLE PATH
BOCA RATON, FL 33496 US

New Mailing Address:

FEI Number: 59-2620559 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:

SAPIR, M. RICHARD
712 US HWY ONE
STE 400
NORTH PALM BEACH, FL 33408 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: D () Delete
Name: HETELSON, ALLAN S
Address: 700 SW PEBBLE LN
City-St-Zip: PALM CITY, FL 34990 US

Title: D () Delete
Name: HAINES, MELINDA
Address: 1848 JUNO ISLES BLVD.
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: CIRKUS, ARTHUR
Address: 14434 STROLLER WAY
City-St-Zip: WELLINGTON, FL 33414

Title: P () Delete
Name: PELIO, ROBERT
Address: 8415 BRIDLE PATH
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: DANCE, SYBIL
Address: 5820 SW GROVE STREET
City-St-Zip: PALM CITY, FL 34990

Title: S () Delete
Name: HOFMANN, GENEVIEVE
Address: 8415 BRIDLE PATH
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GENEVIEVE HOFMANN

SEC

05/04/2009

Electronic Signature of Signing Officer or Director

Date