

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18736

FILED
Jan 23, 2008
Secretary of State

Entity Name: PALM BEACH COUNTY 10-13 CLUB, INC.

Current Principal Place of Business:

P.O. BOX 1511
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

1314 SW 15 STREET
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

P.O. BOX 1511
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 65-0026394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREW, JAMES
1314 SW 15TH ST.
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

ANDRADE, JAMES
1314 SW 15TH ST.
BOYNTON BEACH, FL 33435 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: JAMES ANDRADE

01/23/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROTHSCHILD, THEODORE
Address: 650 SNUG HARBOR DR G 402
City-St-Zip: BOYNTON BEACH, FL 33435

Title: V () Delete
Name: DIFIGLIA, DOMINICK
Address: 4611 VESPASIAN COURT
City-St-Zip: LAKE WORTH, FL 33463

Title: S () Delete
Name: SOLDHON, FREDRIC
Address: 6377 VIA PRIMO ST. APT. PH
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: FINNIN, EUGENE
Address: 314 ASOURY WAY
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: RALPH, WILLIAM J
Address: 400 N. FEDERAL HWY #611
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: P () Delete
Name: ANDRADE, JAMES
Address: 1314 SW 15TH ST
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: LEUPP, ROBERT
Address: 108 HALFMOON CIRCLE
City-St-Zip: HYPOLUXO, FL 33462 US

Title: S (X) Change () Addition
Name: GOLDSTEIN, SAMUEL
Address: 4759 SABLE PINE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33417

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: JAMES ANDRADE

PRES

01/23/2008

Electronic Signature of Signing Officer or Director

Date