


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2006 8:00 am**  
**Secretary of State**

04-19-2006 90103 007 \*\*\*\*61.25

<b>DOCUMENT # N19137</b>							
1. Entity Name <b>VARIETY CLUB OF THE PALM BEACHES, INC.</b>							
Principal Place of Business 2875 S OCEAN BLVD SUITE 200 7 PALM BEACH, FL 33480 US			Mailing Address 2875 S OCEAN BLVD SUITE 200 7 PALM BEACH, FL 33480 US				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State			City & State				
Zip	Country	Zip	Country	4. FEI Number 59-2806086			
				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
NECTOW, HAROLD 2870 OCEAN BLVD., #110 PALM BEACH, FL 33480			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>			
Make check payable to Florida Department of State							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	SHAPIRO, IRVING		NAME				
STREET ADDRESS	2425 PRESIDENTIAL WAY 1504		STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH, FL		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	KUTZ, EDITH B		NAME				
STREET ADDRESS	4561 OAKTREE CT		STREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH, FL 33445		CITY-ST-ZIP				
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition		
NAME	SHULMAN, ALVIN		NAME	DLINDA SIMON			
STREET ADDRESS	17281 BRIDLEWAY TR.		STREET ADDRESS	648 MANATEE BAY DR.			
CITY-ST-ZIP	BOCA RATON, FL 33496		CITY-ST-ZIP	BOYNTON BEACH, FL 33435			
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	NECTOW, HAROLD		NAME				
STREET ADDRESS	2780 OCEAN BLVD., #110		STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH, FL 33480		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	WILLIAM, SANDLER		NAME				
STREET ADDRESS	3100 S OCEAN BL #N402		STREET ADDRESS				
CITY-ST-ZIP	PLM BCH, FL 33480		CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <i>Harold Nectow by</i> <b>HAROLD NECTOW</b> 4/17/06 (56) 585-5561							
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Type Page #)</small>							