

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28567

FILED
May 09, 2007
Secretary of State

Entity Name: AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.

Current Principal Place of Business:

1764 N. CONGRESS AVENUE, STE. 201
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1764 N. CONGRESS AVENUE, STE. 201
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0087858 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

ESTREMER-FITZGERALD, JAMIE
1764 N. CONGRESS AVENUE,
SUITE 201
WEST PALM BEACH, FL 33409 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: VP () Delete
Name: MARIACA, SERGIO A
Address: 2240 W. WOOLBRIGHT RD., SUITE 317
City-St-Zip: BOYNTON BEACH, FL 33426

Title: SD () Delete
Name: GORDON, SHIRLEY
Address: 10 BAY HARBOR ROAD
City-St-Zip: TEQUESTA, FL 33469

Title: PD () Delete
Name: HARALSON, DAVID
Address: 299 KELSEY PARK CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD () Delete
Name: SADOWSKY, ALAN D
Address: 4847 FRED GLADSTONE DR.
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DONALD, LANMAN K
Address: 3040 LAKESHORE DRIVE, STE 203
City-St-Zip: WEST PALM BEACH, FL 33404

Title: SD (X) Change () Addition
Name: ROCHE, LYNNE
Address: 14880 FAIRWIND LANE
City-St-Zip: DELRAY BEACH, FL 33484

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: JAIME ESTREMER-FITZGERALD

COO

05/09/2007

Electronic Signature of Signing Officer or Director

Date