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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra B. Mortnam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N30

(3)

UNIVERSITY OF PENNSYLVANIA ALUMNI CLUB OF THE PALM BEACHES, INC.

Principal Place of Business

Mailing Address

LAURIE L. GILDAN 777 S FLAGLER DR., STE 310-E W PALM BOH FL 33401 LAURIE L. GILDAN 777 S FLAGLER DR., STE 310-E W PALM BCH FL 33401-6162 FILED Apr 10 1997 8:00am Secretary of State



W PALM BOH FL 33401		W PALM BCH FL 33401-6162		3. Date Incorporated or Qualified 3a. Date of Last Report
				02/28/1989 03/13/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21 8295 N. MILITARY TRAIL		26 8295 N. HILITARY TRAIL		NOT APPLICABLE Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
***	ITE F	27 SUITE F	• •	5. Certificate of Status Desired Fee Required
	BEACH GARDENS, FL.	Cily & State 28 PALM BBACH O	PADENS, FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24 334	Country 25 USA	Zip 29 83410 3	Country USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
BI Name ADRIENNE H. CRIFFIN				
GIIDAN	, LAURIE L.		1 1	, oct and
777 S FLAGLER DR., STE 310-E			82 Street Ac	dress (P.O. Box Number is Not Acceptable) 75 N. MILITARY TRAIL. #F
W PALM BCH FL 33401			83	3 MITTELLIAMO LIGHT. IL
11 / ALM BOTTE 65401				
			84 City	LM BBACH GARDEN SFL 85 ZIP CODE 33410
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
office or registered agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obtaining of Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obtaining of Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the pull of the corporation of t				
SIGNATURE		ym	~	
12,	Signature, typed or printed name of registered agent OFFICERS AND		logistered Agent signature rec	
TITLE	PD OFFICERS AND	DELETE	13. 1.1701£	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	MACPHERSON, JAMES H.			L.I Change L.I Addition
NAME	533 OVERLOOK DR		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	NORTH PALM BEACH FL	DELETE	1.4 CITY- ST-ZIP	
	GILDAN, LAURIE L.	DELETE	2.1 TITLE	DIRECTOR Change Addition APPLIN MISHUAGE D.D.S.
NAME	777 S. FLAGLER DR		2.2 NAME	1911 N. FLAGLER DRIVE.
STREET ADDRESS	W PALM BCH FL		23 STREET ADDRESS	1911 NITCHWEETES VICTOR
CITY-ST-ZIP	TD	DELETE	2 4 CITY-ST-ZIP	NEST PALM BEACH, FL 33407 [] Change [] Addition
TITLE	GABBE, RICHARD	CT DETELE		Li Change Lij Adoition
NAME	11 EDINBURGH CT		3.2 NAME	
STREET ADDRESS	PALM BCH GARDEN FL		3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	FALM DOT GARDEN FE	☐ DELETE	3.4. City-St-ZiP	
HILE				
MACRE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		DECESE	4. 2 NAME	☐ Change ☐ Addition
STREET ADDRESS		☐ DELETE	4. 2 NAME 4.3 STREET ADDRESS	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME			4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE	Change Addition

To neigo denity that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed in on an effectively with adaptives.

R2E037 (9/96)