

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32470

FILED  
Jul 02, 2008  
Secretary of State

**Entity Name:** PALM BEACH COUNTY OFFICIALS ASSOCIATION, INC.

**Current Principal Place of Business:**

1320 FISHERS PLACE  
GREENACRES, FL 33413 US

**New Principal Place of Business:**

**Current Mailing Address:**

1320 FISHERS PLACE  
GREENACRES, FL 33413 US

**New Mailing Address:**

**FEI Number:** 65-0250887 **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:**

PALM BEACH COUNTY OFFICIALS ASSN, INC.  
10473 LAKE VISTA CIRCLE  
BOCA RATON, FL 33498 US

**Name and Address of New Registered Agent:**

PALM BEACH COUNTY OFFICIALS ASSN, INC.  
1320 FISHERS PLACE  
GREENACRES, FL 33413 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:

07/02/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BLACK, RUSS  
Address: 1320 FISHERS PLACE  
City-St-Zip: GREENACRES, FL 33413

Title: VP ( ) Delete  
Name: FRANCIS, JOSEPH  
Address: 1934 MONKS COURT  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TD ( ) Delete  
Name: SOTOLOFF, STEVEN  
Address: 10473 LAKE VISTA CIRCLE  
City-St-Zip: BOCA RATON, FL 33498

Title: S ( ) Delete  
Name: GUILIANI, EDWARD  
Address: 1109 GREEN PINE BLVD., APT. E-1  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: ASRD ( ) Delete  
Name: GERSHBERG, LESLIE  
Address: 5960 BANANA ROAD  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: ASRD ( ) Delete  
Name: GOLDENBERG, LEON  
Address: 3038 QUANTUM LAKES DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33426

**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: RUSSELL L BLACK

PRES

07/02/2008

Electronic Signature of Signing Officer or Director

Date