Feb 22, 1999 8:00 am Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	N41	092

Corporation Name

PICK OF PALM BEACH, INC.

Principal Plac	e of Business	Mailing Address										
230 ROYAL PA	ALM WAY	230 ROYAL PALM WAY STE 403										
PALM BEACH	FL 33480	PALM BEACH FL 33480					1 / 1 / 1 / 1					
US		US										
										•	*	
2. Principal P	lace of Business	2a. Mailing Address				3.	Date Incorpo		alifed		· ·	
21		26					11/29/199	30				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				4.	FEI Number				Api	plied For
22		27					65-02361	77			No	t Applicable
City & Stat	te	City & State				5	Certifcate of	Status Dec	ired D	<u> </u>	\$8.75 A	dditional
23		28					Certificate of	Status Des	110u <u>2</u>		Fee Re	quired
Zip	Country	Zip	Cou	ntry	_	6.	Election Can	npaign Fina	ncing [7	\$5.00	May Be
24	25		30		_		Trust Fund C			<u> </u>	Added t	o Fees
	9. Name and Address of Current	Registered Agent				10.	Name and	Address of	New Regi	stered Ag	ent .	
				81	Name							, ,
SEMADEN	ii, david			82	Street A	ddress (F	O. Box Num	ber is Not A	cceptable)		
230 ROYA	IL PALM WAY			Ш				·				
STE 430				83							*	İ
PALM BE	ACH FL 33480			84	City		·	·		EI	85 Zip C	ode
43 - D	- M	647 4500 Florido Statuto	- 4b		nomed -		n aubmita thia	etatament i	for the nur	FL	anging ite	ragistared
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State our familiar with, and accept the obligation	f Florida. Such change was au	ıthorized	i by t	he corpor	ation's bo	oard of directo	ors. I hereby	accept th	e appointn	nent as rec	jistered
SIGNATURE												Į
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agent	signature req					DATE		
12.	OFFICERS AND		13.				ADDITIONS/C	HANGES 1	O OFFICE			
TITLE	(D	☐ DELETE	1.1 ™	ΠE	-					- 1	Change	Addition
NAME	SEMADENI, DAVID		1.2 NA	ME	1							
STREET ADDRESS	-231-SUNRISE AVENUE						0	Δ		ماد ڪو	1つ	ĺ
CITY-ST-ZIP	PALM BEACH FL 33480		1.3 \$1	REET	ADDRESS 4	230	COYAL	PARLM	HOW	a 40	73	
TITLE				REET /		230	ROYAL	Mark	HALI			
	D	☐ DELETE		TY-ST-		230	loyal	Parm	HALL		Change	☐ Addition
NAME	D MAUS, JOHN	☐ DELETE	1.4 CF	TY-ST-		230	loyal.	PALM	140 CA			☐ Addition
NAME STREET ADDRESS	MAUS, JOHN	☐ DELETE	1.4 CF 2.1 TF 2.2 NA	TY-ST- TLE WE		230	eohal.	Parm	WAY			☐ Addition
	MAUS, JOHN	☐ DELETE	1.4 CF 2.1 TF 2.2 NA 2.3 ST	TY-ST- TLE WE	ZIP ADDRESS	230	eohal.	PALM	HALL			☐ Addition
STREET ADDRESS	MAUS, JOHN 312 WORTH AVE.	☐ DELETE	1.4 CF 2.1 TF 2.2 NA 2.3 ST	TY-ST- TLE VME REET/	ZIP ADDRESS	230	BOYAL	PARM		•		☐ Addition
STREET ADORESS CITY-ST-ZIP	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480		1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF	TY-ST- TLE WME REET / TY-ST	ZIP ADDRESS	230	COYAL	PAIM	HALL	•	Change	
STREET ADORESS CITY-ST-ZIP TITLE	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D		1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA	TY-ST- TLE WE TREET / TTY-ST TLE	ZIP ADDRESS	230	LOYAL	PAIM		•	Change	
STREET ADORESS CITY-ST-ZIP TITLE NAME	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY	☐ DELETE	1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA 3.3 ST	TY-ST- TLE WE TREET / TTY-ST TLE	ADDRESS -ZIP ADDRESS	230	lohal	PARM		•	Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE		1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA 3.3 ST	TY-ST- TLE AME REET / TLE AME REET / TLE AME REET /	ADDRESS -ZIP ADDRESS	230	lohal.	PARM	way		Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480	☐ DELETE	1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA 3.3 ST 3.4. CF	TY-ST- TLE TY-ST TLE TY-ST TLE TY-ST TLE TY-ST- TLE	ADDRESS -ZIP ADDRESS	230	lohal	AARM			☐ Change	☐ Addition
STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480 D	☐ DELETE	1.4 CI 2.1 TT 2.2 NA 2.3 ST 2.4 CI 3.1 TT 3.2 NA 3.3 ST 3.4. CI 4.1 TTI 4. 2 NA	TY-ST- TLE TREET / TLE TLE TREET / TLE TREET / TLY-ST- TLE AME	ADDRESS -ZIP ADDRESS	230	lohal.	AARM	HALI		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480 D MCALLISTER, LARRY	☐ DELETE	1.4 CI 2.1 TT 2.2 NA 2.3 ST 2.4 CI 3.1 TT 3.2 NA 3.3 ST 3.4 CI 4.1 TTT 4.2 NA 4.3 ST	TY-ST- TLE TREET / TLE TLE TREET / TLE TREET / TLY-ST- TLE AME	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	230	EOHAL.	PARM	HALL		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480 D MCALLISTER, LARRY 21 ROYAL POINCIANA WAY	☐ DELETE	1.4 CI 2.1 TT 2.2 NA 2.3 ST 2.4 CI 3.1 TT 3.2 NA 3.3 ST 3.4 CI 4.1 TTT 4.2 NA 4.3 ST	TY-ST- TLE MME REET / TTY-ST TLE AME REET / TTY-ST TLE TTY-ST TLE TTY-ST TLE TTY-ST TLE TTY-ST TTY-ST	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	230	LOHAL	AAIM	HALI		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480 D MCALLISTER, LARRY 21 ROYAL POINCIANA WAY	☐ DELETE	1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CC 4.1 TT 4.2 NA 4.3 ST 4.4 CT	TY-ST- TLE TREET/ TITY-ST TLE TY-ST TLE TY-ST TLE TY-ST- TLE TY-ST- TLE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	230	LOHAL	AAIM	HALI		Change Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MAUS, JOHN 312 WORTH AVE. PALM BEACH FL 33480 D O'NEIL, MANNY 301 AUSTRALIAN AVE PALM BEACH FL 33480 D MCALLISTER, LARRY 21 ROYAL POINCIANA WAY	☐ DELETE	1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4. CC 4.1 TT 4.2 NA 4.3 ST 4.4 CT 5.1 TTI 5.2 NA	TY-ST- TLE MME REET / TLE AME REET / TY-ST REET / TY-ST TLE MME REET / TY-ST TLE MME	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	230	LOHAL	AAIM	HALI		Change Change	Addition Addition

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information indicated on this annual report or sofficer or director of the corporation Block 12 or Block 13 if change 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 upplemental 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 or the repeiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TILLE

NAME

STREET ADDRESS

ED OR PRINTED NAME OF SIGNING OFFICER OR

DELETE

Change

☐ Addition