

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # N43925

1. Entity Name

PALM BEACH COUNTY SPORTS COMMISSION, INC.



Principal Place of Business

**1555 PALM BEACH LAKES BLVD
SUITE 1410
WEST PALM BEACH FL 33401
US**

Mailing Address

**1555 PALM BEACH LAKES BLVD
SUITE 1410
WEST PALM BEACH FL 33401
US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0263296

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARON, GERALD
1555 PALM BEACH LAKES BLVD., #1410
WEST PALM BEACH FL 33401**

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

Signature, typed or printed name of registered agent and the filer (if applicable)

(NOTE: Registered Agent signature is required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **ED** ☐ Delete
NAME **BARON, GERALD**
STREET ADDRESS **1555 PALM BEACH LAKES BLVD, SUITE 1410**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **PRES** ☐ Delete
NAME **DUFRESENE, DONALD P**
STREET ADDRESS **250 AUSTRALIAN AVE**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **VP** ☐ Delete
NAME **SPRING, JUDY**
STREET ADDRESS **4047 OKEECHOBEE BLVD #120**
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **ST** ☐ Delete
NAME **DENT, PATTI**
STREET ADDRESS **520 TONY PENNA DRIVE**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME **000000896671**
STREET ADDRESS **04/25/08-80017-007 61.25**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/08

561-233-3180