

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N45806**

1. Entity Name

PALM BEACH POPS, INC.



Principal Place of Business

500 AUSTRALIAN AVE. SOUTH  
SUITE 100  
WEST PALM BEACH FL 33401

Mailing Address

500 AUSTRALIAN AVE. SOUTH  
SUITE 100  
WEST PALM BEACH FL 33401



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0294494

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

FITZGERALD, JAMES  
500 AUSTRALIAN AVENUE SOUTH  
SUITE 100  
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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/D  
NAME LAPPIN, W. ROBERT ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE. SOUTH-S #100  
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Add  
1000000406250  
02/07/06-80080-020 70.00

TITLE D  
NAME BILDNER, JOAN ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE SOUTH-S #100  
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE D  
NAME BROGAN, JOHN J ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE. SOUTH-S #100  
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE ST  
NAME FITZGERALD, JAMES F. ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE. SOUTH-S #100  
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE D  
NAME ROBINSON, NICHOLAS ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE. SOUTH  
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE D  
NAME COOK, PATRICIA L ☐ Delete  
STREET ADDRESS 500 AUSTRALIAN AVE. SOUTH-S #100  
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

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

*[Handwritten Signature]* James F. Fitzgerald 1/25/06 561-655-3469