

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001117

**FILED**  
**Jun 15, 2004**  
**Secretary of State****Entity Name:** PALM BEACH COUNTY HOTEL & LODGING ASSOCIATION, INC.**Current Principal Place of Business:**230 ROYAL PALM WAY  
#405  
PALM BEACH, FL 33480 US**New Principal Place of Business:**1392 NORTH KILLIAN DRIVE  
SUITE 201  
LAKE PARK, FL 33403 US**Current Mailing Address:**230 ROYAL PALM WAY  
#405  
PALM BEACH, FL 33480 US**New Mailing Address:**1392 NORTH KILLIAN DRIVE  
SUITE 201  
LAKE PARK, FL 33403 US**FEI Number:** 59-3243488**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SEMADENI, DAVID  
230 ROYAL PALM WAY  
SUITE 405  
PALM BEACH, FL 33480 US**Name and Address of New Registered Agent:**SEMADENI, DAVID  
1392 NORTH KILLIAN DRIVE  
SUITE 201  
LAKE PARK, FL 33403 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: DAVID SEMADENI

06/15/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: VP ( ) Delete  
Name: KONSAVAGE, RICK  
Address: 10 N OCEAN WAY  
City-St-Zip: DELRAY BEACH, FL 33444Title: SD ( ) Delete  
Name: DAVID SEMADENI,  
Address: 230 ROYAL PALM WAY SUITE 405  
City-St-Zip: PALM BCH, FLTitle: P ( ) Delete  
Name: NIKODEMUS, ANTON  
Address: 501 E. CAMINO REAL  
City-St-Zip: BOCA RATON, FL 33431Title: VPD ( ) Delete  
Name: LEON, MARGARET  
Address: 1601 BELVEDERE RD  
City-St-Zip: WEST PALM BEACH, FL 33406Title: TD ( ) Delete  
Name: SHEAFFER, DARREL  
Address: 100 S. OCEAN BLVD.  
City-St-Zip: MANALAPAN, FL 33462**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: TD (X) Change ( ) Addition  
Name: TAYLOR, TRICIA  
Address: 1 SOUTH COUNTY ROAD  
City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID SEMADENI

SECR

06/15/2004

Electronic Signature of Signing Officer or Director

Date