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

FILED
Feb 04, 2008 08:00 A
Secretary of State

DOCUMENT # N94000002216

1. Entity Name

PAN AMERICAN ROUND TABLE OF THE TREASURE COAST INC.

Principal Place of Business	Mailing Address
1322 SW CEDAR COVE PORT SAINT LUCIE FL 34986 US	PO BOX 175 PALM CITY FL 34991 US

1st MOORE CR2E037 (10/07)

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

4. FEI Number 65-0507769 ☐ 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
ROZON, NANCY 1322 SW CEDAR COVE PORT SAINT LUCIE FL 34986	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 is required when this filing) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RAZON, NANCY 1322 SW CEDAR COVE PORT SAINT LUCIE FL 34986	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GREENE, JULIETA 991 NW FRESCO WAY #107 JENSEN BEACH FL 34957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	U00000816312 ☐ Change ☐ Addition 02/14/08-80045-008 61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CARRION, MARIALUISA 3390 SE EAST SNOW RD PORT SAINT LUCIE FL 34984	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RS BRYSON, ISABEL 734 SE ESSEX DRIVE PORT SAINT LUCIE FL 34984	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS PETERSON, MARIA T 1997 SW STRATFORD WAY PALM CITY FL 34990	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEVIA, ELA 3538 SW RIVERA ST PORT SAINT LUCIE FL 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Marialuisa Carrion, Treasurer 2/1/2008 772-871-2651