

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000584

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: ARTISTS SHOWCASE OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

815 PALM BEACH LAKES BLVD.  
WEST PALM BEACH, FL

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 158  
WEST PALM BEACH, FL 33402

**New Mailing Address:**

FEI Number: 65-0560738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOWE, CATHERINE  
5305 GREENWOOD AVE  
SUITE 101  
WEST PALM BEACH, FL 33407 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LOWE, CATHERINE  
Address: 5305 GREENWOOD AVENUE, SUITE 101  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: LEWIS, STEPHANIE  
Address: 2200 OLD GERMAN TOWN RD #2500  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: DEBBYE RAING,  
Address: 3372 FOREST HILL BLVD #B101  
City-St-Zip: W PALM BCH, FL 33406

Title: D ( ) Delete  
Name: DILLARD, KALINTHIA  
Address: 1 NORTH CLEMATIS ST #500  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LOWE, CATHERINE  
Address: 11380 PROSPERITY FARMS ROAD STE.112-C  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D (X) Change ( ) Addition  
Name: MOORE, ALICE  
Address: 801 FOURTH STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D (X) Change ( ) Addition  
Name: REID, KURTIS  
Address: 11521 US HIGHWAY 1  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D (X) Change ( ) Addition  
Name: DILLARD, KALINTHIA  
Address: 3300 FOREST HILL BLVD  
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CATHERINE LOWE

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date