2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002588

Entity Name: PALM BEACH BUSINESS ASSOCIATES, INC.

FILED Apr 23, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1301 VISIERA DR WEST PALM BEACH, FL 33418				14243 US HIGHWAY ONE JUNO BEACH, FL 33408			
Current Mailing Address:				New Mailing Address:			
C/O TIMOTHY SHEEHAN 712 US HWY 1 #301 NORTH PALM BEACH, FL 33408				4521 PGA BLVD PMB 144 PALM BEACH GARDENS, FL 33418			
FEI Number:	65-0591329	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Des	sired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agen	t:
AUPPEY, HOPPMAN 1301 VISION DR WEST PALM BEACH, FL 33418				SCHANEL, GLENN 14243 US HIGHWAY ONE JUNO BEACH, FL 33408			
	named entity s e of Florida.	submits this statement for the p	urpose o	f changing i	ts registered	office or registered age	nt, or both,
SIGNATURE: GLENN SCHANEL						04/23/2004	
	Electron	ic Signature of Registered Age	nt			Date	
OFFICER	S AND DIREC	TORS:		ADDITION	S/CHANGE	S TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	D () JOHANSEN, GA 14257 US HWY JUNO BEACH, I	[*] 1		Title: Name: Address: City-St-Zip:	,	()Change ()Addition	
Title: Name: Address: City-St-Zip:	LIEBMAN, HAR' 1264 N MILITAF			Title: Name: Address: City-St-Zip:	LIEBMAN, HA 1264 N MILIT		
Title: Name: Address: City-St-Zip:	HILL, ALAN 742 NORTHLAK	Delete KE BLVD BEACH, FL 33408		Title: Name: Address: City-St-Zip:	D SCHANEL, G 14243 US HI JUNO BEACH	GHWAY ONE	
Title: Name: Address: City-St-Zip:	POSEY, TATE 9850 ALT A1A #	Delete #507 GRDNS, FL 33410		Title: Name: Address: City-St-Zip:	RAHMATALL 912 AUGUST	· ·	
Title: Name: Address: City-St-Zip:	V () BEARD, SUSAN 17369 128 TER JUPITER, FL 3	RN		Title: Name: Address: City-St-Zip:	INNERST, LIS	ATCHEE DR. #3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	FALCIANO, C 2000 PGA BL		

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: GLENN SCHANEL D 04/23/2004