

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003891

FILED
Apr 30, 2009
Secretary of State

Entity Name: SAFARI CLUB INTERNATIONAL CORP., PALM BEACH CHAPTER

Current Principal Place of Business:

3208 N FLAGLER DR
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

3208 N FLAGLER
1-C
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 65-0608788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUCE W. PARRISH, JR. PA
105 S. NARCISSUS AVE
7TH FLR- STE 412
WEST PALM BEACH, FL 33401 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: PD () Delete
Name: HERSEY, HARRY W JR.
Address: 1501 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VD () Delete
Name: HERSEY, HARRY W III
Address: 1501 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: STD () Delete
Name: GEORGE BANKS
Address: 13808 FAIRLANE COURT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: P () Delete
Name: HANLEY, JOYCE S
Address: 3208 N FLAGLER DR.
City-St-Zip: WEST PALM BEACH, FL 33407

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:

I hereby certify that the information supplied with this filing does not qualify 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: JOYCE S HANLEY

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date