2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# N95000004893

Entity Name: THE PALM BEACH POST SEASON TO SHARE FUND, INC.

Current Principal Place of Business:

2751 SOUTH DIXIE HWY.
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

2751 SOUTH DIXIE HWY.
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-0623649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOWDEN, GALE G
2751 SOUTH DIXIE HWY.
WEST PALM BEACH, FL 33405 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: HOWDEN, GALE G
Address: 2751 SOUTH DIXIE HWY.
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: TUCKWOOD, JAN
Address: 2751 SOUTH DIXIE HWY.
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: GERARDI, CHARLES
Address: 2751 SOUTH DIXIE HWY.
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: FOGT, JANIE
Address: 2751 S. DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: FINNELL, JENNIFER
Address: 2751 S. DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: SIEDLIK, LAWRENCE
Address: 2751 S. DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33405

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: ( ) 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: GALE HOWDEN PRES 01/09/2008

Electronic Signature of Signing Officer or Director — Date