

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005268

FILED
Jan 07, 2009
Secretary of State

Entity Name: PALM ISLES MEN'S CLUB, INC.

Current Principal Place of Business:

9545 PALM ISLES DRIVE
BOYNTON BEACH, FL

New Principal Place of Business:

9545 PALM ISLES DRIVE
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

9763 HARBOR LAKE CIRCLE
BOYNTON BEACH, FL 33437

New Mailing Address:

9763 HARBOR LAKE CIRCLE
BOYNTON BEACH, FL 33437 US

FEI Number: 65-0563792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENSPAN, MARTIN
9763 HARBOR LAKE CIRCLE
BOYNTON BEACH, FL 33437 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: TD () Delete
Name: GREENSPAN, MARTIN
Address: 9763 HARBOUR LAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD () Delete
Name: KUNEN, BERNIE
Address: 9661 SHADYBROOK DRIVE # 101
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD () Delete
Name: KASAK, SHELLY
Address: 7284 SUMMERTREE TER
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: LEVINE, SID
Address: 9963 SEACREST CIR 3201
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: GREENSPAN, MARTIN
Address: 9763 HARBOUR LAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: PD (X) Change () Addition
Name: KUNEN, BERNIE
Address: 9661 SHADYBROOK DRIVE # 101
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: SD (X) Change () Addition
Name: KASAK, SHELLY
Address: 7284 SUMMERTREE TER
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VPD (X) Change () Addition
Name: LEVINE, SID
Address: 9963 SEACREST CIR 3201
City-St-Zip: BOYNTON BEACH, FL 33437 US

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: MARTIN GREENSPAN

TD

01/07/2009

Electronic Signature of Signing Officer or Director

Date