

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001033

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: BUSINESS LOAN FUND OF THE PALM BEACHES, INC.

## Current Principal Place of Business:

2110 N. FLORIDA MANGO RD  
SECOND FLOOR  
WEST PALM BEACH, FL 33409 US

## Current Mailing Address:

2110 N. FLORIDA MANGO RD  
SECOND FLOOR  
WEST PALM BEACH, FL 33409 US

## New Principal Place of Business:

2200 N. FLORIDA MANGO RD  
401  
WEST PALM BEACH, FL 33409 US

## New Mailing Address:

2200 N. FLORIDA MANGO RD  
SUITE 401  
WEST PALM BEACH, FL 33409 US

FEI Number: 59-3392460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DAVENPORT, JR, LAURENCE F DIR  
2110 N. FLORIDA MANGO RD  
SECOND FLOOR  
WEST PALM BEACH, FL 33409 US

## Name and Address of New Registered Agent:

DAVENPORT, JR, LAURENCE F DIR  
2200 N. FLORIDA MANGO RD  
SUITE 401  
WEST PALM BEACH, FL 33409 US

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: LAURENCE F. DAVENPORT, JR.

02/25/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FORD-LEE, MAUDE  
Address: 602 CLEAR LAKE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: C ( ) Delete  
Name: GAINES, LIA T  
Address: 5725 CORPORATE WAY #201  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: V ( ) Delete  
Name: SMITH, SEABRON A  
Address: 401 W. ATLANTIC AVE., SUITE 09  
City-St-Zip: DELRAY BEACH, FL 33444

Title: S ( ) Delete  
Name: SULLIVAN, THAIS  
Address: 971 VILLAGE BOULEVARD  
City-St-Zip: CAPE CORAL, FL 33909

Title: D ( ) Delete  
Name: BAKER, VERDENIA  
Address: 301 N. OLIVE AVENUE, 11TH FLOOR  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T ( ) Delete  
Name: AHRENHOLZ, JOHN  
Address: 205 DATURA STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

## 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: S (X) Change ( ) Addition  
Name: SULLIVAN, THAIS  
Address: 600 N. US 1  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: LIA T. GAINES

C

02/25/2009

Electronic Signature of Signing Officer or Director

Date