

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002185

FILED
May 22, 2008
Secretary of State

Entity Name: PALM BEACH CRICKET CLUB, INC.

Current Principal Place of Business:

1549 43RD STREET
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

1549 43RD STREET
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0660111 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROBINSON, RAY
1549 43RD STREET
WEST PALM BEACH, FL 33407 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBINSON, RAY
Address: 1549 43 STREET
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: VP () Delete
Name: JORDAN, BILL
Address: 4021 LATONA AVE
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: T () Delete
Name: LEWIS, BERESFORD
Address: 1461 PALM BEACH LAKES
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: S () Delete
Name: LIYANAGE, PRIYANTA
Address: 4115 HEARTSTONE PLACE
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D () Delete
Name: WEBSTER, MAXWELL
Address: 4301 S.W. JARMER RD
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: D () Delete
Name: MCNEIL, COURTNEY
Address: 16103 82ND ROAD NORTH
City-St-Zip: LOXAHACHEE, FL 33470 US

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: SCANTLEBURY, PATRICK
Address: 810 SOUTH D. STREET
City-St-Zip: LAKE WORTH, FL 33460 US

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: RAY ROBINSON

P

05/22/2008

Electronic Signature of Signing Officer or Director

Date