

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005162

FILED
Mar 28, 2009
Secretary of State

Entity Name: WEST PALM BEACH EMPLOYEES RETIREMENT ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 22422
WEST PALM BEACH, FL 33406

New Principal Place of Business:

3200 SUMMIT BLVD.
WEST PALM BEACH, FL 33416

Current Mailing Address:

POST OFFICE BOX 22422
WEST PALM BEACH, FL 334162422

New Mailing Address:

FEI Number: 65-0691440 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STEVEN SLOANE NEWBURGH
1675 PALM BEACH LAKES BLVD.
SUITE 700
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: ALFREDO, LAY
Address: 2797 GEORGIA AVE.
City-St-Zip: W. PALM BEACH, FL 33405

Title: VPD () Delete
Name: HURLEY, GOERGE
Address: 2825 E CROSLEY DR. APT H
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TD () Delete
Name: FAGAN, DOROTHY
Address: 316 MARLBROUGH PLACE
City-St-Zip: W. PALM BEACH, FL 33405

Title: SD () Delete
Name: DUNCAN, ARLETTE
Address: 2010 S FEDERAL HWY APT #3081
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HURLEY, GEORGE PRES.
Address: 2825 E.CROSLEY DR. APT. H
City-St-Zip: W. PALM BEACH, FL 33415

Title: VPD (X) Change () Addition
Name: BARNARD, VICKI V. PRES
Address: 11289 PERSIMMON BLVD.
City-St-Zip: WEST PALM BEACH, FL 33411

Title: TD (X) Change () Addition
Name: FAGAN, DOROTHY TREAS.
Address: 316 MARLBROUGH PLACE
City-St-Zip: W. PALM BEACH, FL 33405

Title: SD (X) Change () Addition
Name: BARBARA, EVANS SECR.
Address: 141 WALKER AVE.
City-St-Zip: GREENACRES, FL 33463

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: DOROTHY FAGAN

TREA

03/28/2009

Electronic Signature of Signing Officer or Director

Date