

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000965

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** PALM BEACH PALM & CYCAD SOCIETY, INC.

**Current Principal Place of Business:**

339 WALTON BLVD  
WEST PALM BEACH, FL 33405 US

**New Principal Place of Business:**

**Current Mailing Address:**

POB 212228  
WEST PALM BEACH, FL 33421 US

**New Mailing Address:**

**FEI Number:** 65-0814969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRIEND, PAULA  
4292 FOSS RD.  
LAKE WORTH, FL 33461 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  
**Name:** INGGRIANY, DEWEY  
**Address:** 339 WALTON BLVD  
**City-St-Zip:** WEST PALM BEACH, FL 33405

**Title:** VP  
**Name:** KITTY, PHILLIP  
**Address:** 4292 FOSS RD.  
**City-St-Zip:** LAKE WORTH, FL 33461

**Title:** VD  
**Name:** HOLTON, DALE  
**Address:** 5221 3RD ROAD  
**City-St-Zip:** LAKE WORTH, FL 33467

**Title:** P  
**Name:** AHLBORN, BETTY  
**Address:** 13823 PADDLEFOOT LANE  
**City-St-Zip:** LOXAHATCHEE, FL 33470

**Title:** SD  
**Name:** SALLENBACH, RUTH  
**Address:** 6285 SOUTH MILITARY TRAIL  
**City-St-Zip:** LAKE WORTH, FL 33463

I hereby 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 all other like empowered.

**SIGNATURE:** INGGRIANYDEWEY

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03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date