

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002824

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: THE TRADITION OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417

**New Mailing Address:**

FEI Number: 65-0888855      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MYERS, KEITH A  
4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417      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: D      ( ) Delete  
Name: SIEGEL, HERBERT J  
Address: 6 WINDSOR COURT  
City-St-Zip: PALM BEACH, FL 33480

Title: D      ( ) Delete  
Name: KATZ, STANLEY M  
Address: 2 NORTH BREAKERS ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: S      ( ) Delete  
Name: LORING, ARTHUR S  
Address: 622 NORTH FLAGLER DRIVE #1001  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP      ( ) Delete  
Name: PLATZNER, HERBERT B  
Address: 6949 FOUNTAINS CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

Title: D      ( ) Delete  
Name: SPIRA, SEYMOUR L  
Address: 3280 MONET DRIVE WEST  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P      ( ) Delete  
Name: BLOCH, BEATRICE  
Address: 3349 ST. MALO COURT  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: ENGLESTEIN, ALEC  
Address: 680 S. OCEAN BLVD.  
City-St-Zip: PALM BEACH, FL 33480

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:      ( ) 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: KEITH A. MYERS

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

MR.

03/16/2009

\_\_\_\_\_  
Date