2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N98000003910

Entity Name: POETS OF THE PALM BEACHES, INC.

Current Principal Place of Business:

7622 TRAPANI LANE
BOYNTON BEACH, FL 33472 US

New Principal Place of Business:

Current Mailing Address:

7622 TRAPANI LANE
BOYNTON BEACH, FL 33472 US

New Mailing Address:

FEI Number: 65-0856057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMA, CORA LEE
7622 TRAPANI LANE
BOYNTON BEACH, FL 33472 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: DV ( ) Delete
Name: PALOZZI, JOHN
Address: 7622 TRAPANI LN.
City-St-Zip: BOYNTON BEACH, FL 33472

Title: P ( ) Delete
Name: LOY, DIANA
Address: 7622 TRAPANI LN.
City-St-Zip: BOYNTON BEACH, FL 33472

Title: DV ( ) Delete
Name: DUNCAN, NORMA
Address: 7622 TRAPANI LN.
City-St-Zip: BOYNTON BEACH, FL 33472

Title: DV ( ) Delete
Name: WOLFSON, MARJORIE
Address: 7622 TRAPANI LN.
City-St-Zip: BOYNTON BEACH, FL 33472

Title: DT ( ) Delete
Name: PALMA, CORA LEE
Address: 7622 TRAPANI LN
City-St-Zip: BOYNTON BEACH, FL 33472

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: ( ) 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: CORA LEE PALMA T 04/23/2009

Electronic Signature of Signing Officer or Director Date