

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000006751

FILED
Sep 03, 2009
Secretary of State

Entity Name: PALM BEACH BUSINESS GROUP, INC.

Current Principal Place of Business:

205 WORTH AVENUE
SUITE 317
PALM BEACH, FL 33480

New Principal Place of Business:

205 WORTH AVENUE
SUITE 201
PALM BEACH, FL 33480

Current Mailing Address:

205 WORTH AVENUE
SUITE 317
PALM BEACH, FL 33480

New Mailing Address:

205 WORTH AVENUE, SUITE 201
POB 2753
PALM BEACH, FL 33480

FEI Number: 65-0877806 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:

ROSS, THOMAS H
205 WORTH AVE
SUITE 317
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

ROSS, THOMAS H
205 WORTH AVE
SUITE 201
PALM BEACH, FL 33480 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: THOMAS H. ROSS

09/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSS, THOMAS
Address: 205 WORTH AVENUE, SUITE 317
City-St-Zip: PALM BEACH, FL 33480

Title: VPD () Delete
Name: SCHENCK, RALPH
Address: 1655 PALM BEACH LAKES BLVD, SUITE 1012
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete
Name: DIXON, MICHAEL
Address: 249 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROSS, THOMAS
Address: 205 WORTH AVENUE, SUITE 201
City-St-Zip: PALM BEACH, FL 33480

Title: VPD (X) Change () Addition
Name: SCHENCK, RALPH
Address: POB 2753
City-St-Zip: PALM BEACH, FL 33480

Title: SEC (X) Change () Addition
Name: MURPHY, ELIZABETH S
Address: 101 BRADLEY, SUITE 201
City-St-Zip: PALM BEACH, FL 33480

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: THOMAS H ROSS

PRES

09/03/2009

Electronic Signature of Signing Officer or Director

Date