2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 14, 2006 08:00 AN Secretary of State DOCUMENT # N99000000670 1. Entity Name SILVER WINGS FRATERNITY PALM BEACH CHAPTER. Principal Place of Business Mailing Address 132 S ANCHORAGE DR NORTH PALM BEACH FL 33408 132 S ANCHORAGE DR NORTH PALM BEACH FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 65-0889030 Not Applicat: Z_{10} Zio Country Country \$8.75 Additional 5. Certificate of Status Desired. __ [6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MOONEY, JOHN Street Address (P.O. Box Number is Not Acceptable) 132 S. ANCHORAGE DRIVE NORTH PALM BEACH FL 33408 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D HILE TITLE Delete DAVIS, JUNE MAAH U000000508487 250 VIA BELLARIA STREET ADDRESS STREET ADDRESS 04/28/06-80006-020 61.25 CITY-ST-ZIP PALM BEACH FL 33480 City-St-ZiP ☐ Delete ☐ Change Advan. TITLE TITLE NAME SCHOOLEY, CHUCK 7572 HAWKS LANDING DR STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33412 CITY-ST-ZIP CHTY - ST- ZIP TITLE ☐ Delate ☐ Change Adjuly MOONEY, JOHN NAME STREET ADDRESS 132 S ANCHORAGE DR STREET ADDRESS CITY-ST-ZIP NORTH PALM BEACH FL 33408 CITY-ST-ZIP ☐ Add** D ☐ Delete DILLE ☐ Change TITLE NAME MARERRO-ZIEL, MYRIAM NAME STREET ADDRESS 4386 GARDENIA STREET ADDRESS WEST PALM BEACH FL 33410 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change □ Additio MOUHOT, DICK NAME NAME 2633 LANTANA ROAD #2 STREET ADDRESS STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Adriti STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

SIGNATURE: John Power ST MAY 2006 561-863-7512

if changed, or on an attachment with an address, with all other like empowered

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11