08/15/2008-90001-012-$150.00-$150.00

FILED

2008 FOR PROFIT CORPORATION ANNUAL REPORT

2008 SEP 16 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000010010

1. Entity Name
THE ARGOSY PROGRAM, INC.

Principal Place of Business
~~251 ROYAL PALM WAY~~ 340½ Plymouth
~~SUITE 100-A~~ West Palm Beach Fl
~~PALM BEACH, FL 33480~~ 33405

Mailing Address
~~251 ROYAL PALM WAY~~ P.O. Box 6516
~~SUITE 100-A~~ West Palm Beach, Fl 33405
~~PALM BEACH, FL 33480~~

05122008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #: 340½ PLYMOUTH
Suite, Apt. #, etc.
City & State: W. Palm Beach Fl
Zip: 33405 Country: Palm Beach

3. Mailing Address: P.O. Box 6516
Suite, Apt. #, etc.
City & State: W. Palm Beach Fl
Zip: 33405 Country: Palm Beach

4. FEI Number: 65-1091449 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SLATER, ROBERT W
214 BRAZILIAN AVE., STE. 260
PALM BEACH, FL 33480

7. Name and Address of New Registered Agent
Name: Jim Donovan
Street Address (P.O. Box Number is Not Acceptable): 3046 S. Congress
City: Lake Worth FL Zip Code: 33461

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: James J Donovan CPA 9/11/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D UNDERWOOD, ANTONY 214 BRAZILIAN AVE STE 230 PALM BEACH, FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	UNDERWOOD ANTONY 340½ Plymouth Rd W. Palm Beach, Fl	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Antony Underwood 8-8-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #