2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P01000050031

Entity Name: PBSF, INCORPORATED

Current Principal Place of Business:

100 S E 2ND STREET
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

100 S E 2ND STREET
DELRAY BEACH, FL 33444 US

Current Mailing Address:

4694 FRANCES DRIVE
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 65-1106034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TRICK, WILLIAM W JR.
1216 E. ATLANTIC AVENUE
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

TRICK, JR., WILLIAM W
1216 E. ATLANTIC AVENUE
POMPANO BEACH, FL 33062 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: WILLIAM W. TRICK, JR. 04/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: BARNES, BONNIE L
Address: 4694 FRANCES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: V ( ) Delete
Name: SLOAN, MARK C
Address: 1108 NORTH D STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: V ( ) Delete
Name: PUHLMAN, EDWARD
Address: 4327 APPIAN WAY
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: PUHLMAN, EDWARD B
Address: 4327 APPIAN WAY
City-St-Zip: GREENACRES, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE L. BARNES DPT 04/28/2006
Electronic Signature of Signing Officer or Director Date