

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90352 047 ***158.75

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DOCUMENT # **P94000084732**

1. Entity Name
P + L DESIGN GROUP, INC.



Principal Place of Business
~~2705 PARK STREET~~
LAKE WORTH FL 33460

Mailing Address
~~P.O. BOX 6077~~
WEST PALM BEACH FL 33405



2. Principal Place of Business
11760 US Highway One

3. Mailing Address
← same as

Suite, Apt. #, etc.
Suite 102

Suite, Apt. #, etc.
Place of Bus.

CHECK HERE IF MAKING CHANGES

City & State
North Palm Beach FL

City & State

4. FEI Number **65-0540517**

Applied For
Not Applicable

Zip
33408

Country
US

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KNEEN, JEFFREY D
1400 CENTREPARK BLVD.
SUITE 1000
WEST PALM BEACH FL 33401

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 Paul E. Neff, President DATE 04/17/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **PTD NEFF, PAUL**
STREET ADDRESS ~~2705 PARK STREET~~
CITY-ST-ZIP **LAKE WORTH FL**

Change Addition
NAME
STREET ADDRESS **11760 US Highway One Suite 102**
CITY-ST-ZIP **North Palm Beach FL 33408**

TITLE Delete
NAME **VPSD IDLE, BRIAN D**
STREET ADDRESS ~~2705 PARK STREET~~
CITY-ST-ZIP **LAKE WORTH FL**

Change Addition
NAME
STREET ADDRESS **11760 US Highway One Suite 102**
CITY-ST-ZIP **North Palm Beach FL 33408**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition
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STREET ADDRESS
CITY-ST-ZIP

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Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **SIGNATURE REQUIRED Paul E. Neff** DATE **04/17/03** DAYTIME PHONE # **561 626-9704**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)