

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000019384

Entity Name: PS OF PALM BEACH, INC.

FILED  
Feb 08, 2008  
Secretary of State

## Current Principal Place of Business:

5145 W. STATE ST.  
HOMOSASSA, FL 34446 US

## New Principal Place of Business:

11202 W BLUEBELL DR  
CRYSTAL RIVER, FL 34428 US

## Current Mailing Address:

5145 W. STATE ST.  
HOMOSASSA, FL 34446 US

## New Mailing Address:

11202 W BLUEBELL DR  
CRYSTAL RIVER, FL 34428 US

FEI Number: 65-0738706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEE, SHANA  
5145 W STATE ST  
HOMOSASSA, FL 34446 US

## Name and Address of New Registered Agent:

DEE, SHANA  
11202 W BLUEBELL DR  
CRYSTAL RIVER, FL 34428 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:

02/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DEE, SHANA  
Address: 5145 W. STATE ST.  
City-St-Zip: HOMOSASSA, FL 34446

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DEE, SHANA  
Address: 11202 W BLUEBELL DR  
City-St-Zip: CRYSTAL RIVER, FL 34428

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHANA DEE

P

02/08/2008

Electronic Signature of Signing Officer or Director

Date