

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90231 019 \*\*\*150.00

~~1998~~ **1999**  
DOCUMENT # **P97000104705 (3)** ✓

1. Corporation Name

**PALM BEACH REAL ESTATE SERVICES, INC.**



Principal Place of Business

Mailing Address

**1355 WEST PALMETTO PARK ROAD  
SUITE 263  
BOCA RATON FL 33486**

**1355 WEST PALMETTO PARK ROAD  
SUITE 263  
BOCA RATON FL 33486**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/12/1997**

4. FEI Number

**65-0800413**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30 ☐ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**HUNZEKER, BRENDA L  
1355 WEST PALMETTO PARK ROAD  
SUITE 263  
BOCA RATON FL 33486**

81. Name

**Sylvia Hood**

82. Street Address (P.O. Box Number is Not Acceptable)

**1355 W Palmetto Park Road, Ste 263**

83.

84. City

**Boca Raton**

FL

85. Zip Code  
**33486**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered  
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered  
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

**Sylvia Hood**

**4-30-98**

12. OFFICERS AND DIRECTORS

☒ DELETE

1  
NAME  
**D  
HUNZEKER, BRENDA L**  
2  
STREET ADDRESS  
**1355 WEST PALMETTO PARK RD. STE. 263**  
3  
CITY-STATE-ZIP  
**BOCA RATON FL 33486**

☐ DELETE

4  
NAME  
  
5  
STREET ADDRESS  
  
6  
CITY-STATE-ZIP

☐ DELETE

7  
NAME  
  
8  
STREET ADDRESS  
  
9  
CITY-STATE-ZIP

☐ DELETE

10  
NAME  
  
11  
STREET ADDRESS  
  
12  
CITY-STATE-ZIP

☐ DELETE

13  
NAME  
  
14  
STREET ADDRESS  
  
15  
CITY-STATE-ZIP

☐ DELETE

16  
NAME  
  
17  
STREET ADDRESS  
  
18  
CITY-STATE-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE

**PD**

1.2 NAME

**Hood, Wenford L.**

1.3 STREET ADDRESS

**1005 NW 5th Street**

1.4 CITY-STATE-ZIP

**Boca Raton, FL 33486**

☐ Change ☒ Addition

2.1 TITLE

**VD**

2.2 NAME

**Hood, Sylvia**

2.3 STREET ADDRESS

**1005 NW 5th Street**

2.4 CITY-STATE-ZIP

**Boca Raton, FL 33486**

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

**We have not received a 1999  
Report Form. Please accept this  
as our report with the check  
for \$150 for the fee as  
enclosed**

**Wenford L. Hood**  
**4-30-99**