

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048503

FILED
Apr 06, 2010
Secretary of State

Entity Name: PBD&P, INC.

Current Principal Place of Business:

470 COLUMBIA DRIVE
SUITE 102-A
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

470 COLUMBIA DRIVE
SUITE 102-A
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0846826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRELL, JAMES A
250 AUSTRALIAN AVE SO STE 500 W
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: ROSENBERG, STEVEN
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V
Name: SOKOLOFF, DAN
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V
Name: FAYNE, SCOTT
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S
Name: DIBACCO, ROBERT
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: T
Name: SMITH, ARTHUR F
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: ZWECKER, WARREN
Address: 470 COLUMBIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby 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 all other like empowered.

SIGNATURE: STEVEN ROSENBERG

P

04/06/2010

Electronic Signature of Signing Officer or Director

_____ Date