

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 04, 2012
Secretary of State

DOCUMENT# N03000000389

Entity Name: OLD PALM FOUNDATION, INC.**Current Principal Place of Business:**11784 WEST SAMPLE ROAD
103
CORAL SPRINGS, FL 33065 US**New Principal Place of Business:**11889 OLD PALM DRIVE
PALM BEACH GARDENS, FL 33418 US**Current Mailing Address:**11784 WEST SAMPLE ROAD
103
CORAL SPRINGS, FL 33065 US**New Mailing Address:****FEI Number:** 72-7552883 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 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

OFFICERS AND DIRECTORS:**Title:** D
Name: AUERBACH, MARK
Address: 11746 BELLA DONNA CT
City-St-Zip: PALM BEACH GARDENS, FL 33418 US**Title:** S
Name: IMPELLITTIERE, DARLENE
Address: 11889 OLD PALM DR.
City-St-Zip: PALM BEACH GARDENS, FL 33418 US**Title:** P
Name: SNAVELY, LESLIE
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US**Title:** VPT
Name: WALKER, GARY
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US

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

SIGNATURE: ANA MONTOYA

D

04/04/2012

Electronic Signature of Signing Officer or Director

Date