## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003145

FILED Feb 06, 2012 Secretary of State

Entity Name: COMMUNITY LAND TRUST OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

2240 PALM BEACH LAKES BLVD

SUITE 302

WEST PALM BEACH, FL 33409 US

Current Mailing Address: New Mailing Address:

2240 PALM BEACH LAKES BLVD SUITE 302

WEST PALM BEACH, FL 33409 US

FEI Number: 20-5090958 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORP DIRECT AGENTS TEMPLETON, JOHN

515 EAST PARK AVENU 2240 PALM BÉACH LAKES BLVD.

TALLAHASSEE, FL 32301 US SUITE 302

WEST PALM BEACH, FL 33409 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: JOHN TEMPLETON 02/06/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: LUCAS, HAZEL

Address: 311 SOUTH DIXIE HWY, SUITE # 140 City-St-Zip: WEST PALM BEACH, FL 33405

Title: VPD

Name: KESHAVARZ, MAZIAR

Address: 711 N. DIXIE HIGHWAY, SUITE 201 City-St-Zip: WEST PALM BEACH, FL 33401

Title: S

Name: HINNERS, BRIAN

Address: 777 E. ATLANTIC AVENUE, SUITE 500

City-St-Zip: DELRAY BEACH, FL 33483

Title:

Name: USHER, ANGLEA

Address: 3300 FOREST HILL BLVD, SUITE C-110

City-St-Zip: WEST PALM BEACH, FL 33406

Title:

Name: TEMPLETON, JOHN

Address: 222 LAKEVIEW AVENUE, SUITE 1200 City-St-Zip: WEST PALM BEACH, FL 33401

Title:

 Name:
 MORRISON-PEARCE, CHRISTINA

 Address:
 2000 S. OCEAN BLVD., SUITE # 307

 City-St-Zip:
 DELRAY BEACH, FL 33483

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: CLACOURSE BLUM E.D. 02/06/2012