

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701986

**Entity Name:** TRIANGLE CLUB, INC.

**Current Principal Place of Business:**

1369 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

1369 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 59-0919735

**Certificate of Status Desired:** No

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

HENRY, CHRIS  
1369 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33401 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:** CHRIS HENRY

04/20/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WARWICK, WILLIAM  
Address        736 SUNSET ROAD  
City-State-Zip: WES PALM BEACH FL 33401

Title            TRUSTEE  
Name            SMILEY, EDWARD  
Address        7500 MONTE VERDE LANE  
City-State-Zip: WEST PALM BEACH FL 33412

Title            TRUSTEE  
Name            REID, LANCE  
Address        45 NEW JERSEY ST  
City-State-Zip: WEST PALM BEACH FL 33401

Title            TRUSTEE  
Name            BEVAN, SHEILA  
Address        361 QUEBEC COURT  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            TRUSTEE  
Name            FORMAN, ERIC  
Address        10247 HUNT CLUB LANE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title            TRUSTEE  
Name            WEBSTER, SUZANNE  
Address        1369 OKEECHOBEE ROAD  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP  
Name            PUTNAM, STUART  
Address        234 SORIAO DRIVE  
City-State-Zip: JUPITER FL 33458

Title            TREASURER  
Name            MEHLER, CHARLES  
Address        4585 ARTESA WAY  
City-State-Zip: PALMBEACH GARDENS FL 33418

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*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:** CHARLES MEHLER

**TREASURER**

04/20/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY

Name GAGNON, EVE

Address 1441 BRANDYWINE ROAD  
APT 1200-0

City-State-Zip: WEST PALM BEACH FL 33409