

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705017

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**2968550713CC**

**Entity Name:** UNITY OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

1901 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

1901 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33407 US

**FEI Number: 59-0914216**

**Certificate of Status Desired: No**

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

BRUCE, DIANNE  
1210 SUGAR SANDS BOULEVARD  
#141  
RIVIERA BEACH, FL 33404 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: DIANNE BRUCE**

**01/15/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           CULBERTSON, LINDA  
Address        8208 WATERLINE DRIVE  
City-State-Zip: BOYNTON BEACH FL 33472

Title           VP  
Name           RUSSO, PAT  
Address        20 VIA AURELIA  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title           TRUSTEE  
Name           MALINOWSKI, BRUCE  
Address        108 LAKE HELEN DR  
City-State-Zip: WEST PALM BEACH FL 33411

Title           TREASURER  
Name           ALBEE, DAVID  
Address        2563 WEST CARANDIS ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title           TRUSTEE  
Name           TOUSSAINT, PAMELA  
Address        538 EDGEBROOK LANE  
City-State-Zip: WEST PALM BEACH FL 33411

Title           SECRETARY  
Name           KOPP, WILLIAM  
Address        316 PLANTATION ROAD  
City-State-Zip: PALM BEACH FL 33480

Title           SENIOR MINISTER  
Name           STEVENS, TAYLOR E  
Address        826 WRIGHT DR  
City-State-Zip: LAKE WORTH FL 33461

*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: TAYLOR E. STEVENS**

**SENIOR MINISTER**

**01/15/2020**

Electronic Signature of Signing Officer/Director Detail

Date