

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713689

Entity Name: PALM BEACH HABILITATION CENTER, INC.**Current Principal Place of Business:**4522 SOUTH CONGRESS AVENUE
PALM SPRINGS, FL 33461**Current Mailing Address:**4522 SOUTH CONGRESS AVENUE
PALM SPRINGS, FL 33461 US**FEI Number:** 59-6213381**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TORCIVIA, GLEN
NORTHPOINT CORPORATE CENTER
701 NORTHPOINT PARKWAY SUITE 209
WEST PALM BEACH, FL 33407 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:** GLEN TORCIVIA

03/14/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VC
Name	MOORE, E. EARL
Address	4522 SOUTH CONGRESS AVENUE
City-State-Zip:	PALM SPRINGS FL 33461

Title	TREASURER
Name	HARSH, BILL
Address	4522 SOUTH CONGRESS AVENUE
City-State-Zip:	PALM SPRINGS FL 33461

Title	CEO
Name	LIN, DAVID
Address	4522 SOUTH CONGRESS AVENUE
City-State-Zip:	PALM SPRINGS FL 33461

Title	CHAIRMAN
Name	LOFASO, ANTHONY M.
Address	4522 SOUTH CONGRESS AVENUE
City-State-Zip:	PALM SPRINGS FL 33461

Title	SECRETARY
Name	SANTORO, MELISSA
Address	4522 SOUTH CONGRESS AVENUE
City-State-Zip:	PALM SPRINGS 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: DAVID LIN

CEO

03/14/2019

Electronic Signature of Signing Officer/Director Detail

Date