Current Principal Place of Business:
1123 CRESTWOOD BOULEVARD
LAKE WORTH, FL 33460
Current Mailing Address:
1123 CRESTWOOD BOULEVARD
LAKE WORTH, FL 33460 US
,

FEI Number: 59-1830267

**DOCUMENT# 743056** 

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

PALACIO, SERGIO MED 1123 CRESTWOOD BOULEVARD LAKE WORTH, FL 33460 US Certificate of Status Desired: Yes

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

### **Officer/Director Detail :**

Title	Ρ	Title	VP			
Name	LUCE, DEAN	Name	MOLINA, JEANETTE			
Address	437 S. COUNTRY CLUB DRIVE	Address	740 EAST OCEAN AVENUE, #309			
City-State-Zip:	ATLANTIS FL 33462	City-State-Zip:	BOYNTON BEACH FL 33435			
Title	BD	Title	SEC			
Name	SMITH, BERNARD M	Name	ZAVALA, GAYLE			
Address	625 ATLANTIS ESTATES WAY	Address	12219 SANNENWOOD LANE			
City-State-Zip:	ATLANTIS FL 33462	City-State-Zip:	WELLINGTON FL 33414			
Title	BD	Title Name	EXECUTIVE DIRECTOR PALACIO, SERGIO M			
Name	ASENCIO, FREDDY	Address	1123 CRESTWOOD BLVD			
Address City-State-Zip:	10484 POLO LAKE DRIVE APT 206 WELLINGTON FL 33414	City-State-Zip:	LAKE WORTH FL 33460			
		Title	TREASURER			
Title	BD	Name	EAKIN, DAVID			
Name Address	DICKINSON, ILSA 7292 ST. ANDREW'S ROAD	Address	2381 SUNSET AVE APT 101			
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33461			

### Continues on page 2

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: SERGIO M. PALACIO

EXECUTIVE DIRECTOR 01/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

# RATION ANNUAL REPORT

Entity Name: FARMWORKER COORDINATING COUNCIL OF PALM BEACH COUNTY, INC.

### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 02, 2018 Secretary of State CC3760178621

Date

FILED

### **Officer/Director Detail Continued :**

Name

Address

Title	BD	Title	BD
Name	SALVADOR-HARBECK, ALEIDA	Name	DAVID, CHARLES
Address	240 GRAY STREET	Address	6390 SAGEWOOD WAY
City-State-Zip:	WEST PALM BEACH FL 33405	City-State-Zip:	DELRAY BEACH FL 33484
Title	BD		

100 City-State-Zip: PALM BEACH GARDENS FL 33410

NAVARRO, CARLOS 1125 RCA CENTER DRIVE