I hereby certify that the information indicated on this report or supplemental report is true and accurate oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute above, or on an attachment with all other like empowered.	
SIGNATURE: KYLE ROBERTS-RUGE	CHIEF FINANCIAL

Entity Name: THE RAYMOND F. KRAVIS CENTER FOR THE PERFORMING ARTS, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**Current Principal Place of Business:** 

701 OKEECHOBEE BLVD. W PALM BEACH, FL 33401

# **Current Mailing Address:**

701 OKEECHOBEE BLVD. W PALM BEACH, FL 33401

# FEI Number: 59-2245054

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

NASON, YEAGER, GERSON, HARRIS & FUMERO, P.A 3001 PGA BOULEVARD SUITE 305 PALM BEACH GARDENS, FL 33410 US

Certificate of Status Desired: No

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	DIRECTOR	Title	D	
Name	MEYER, WILLIAM A	Name	DREYFOOS, ALEXANDER W	
Address	1601 BELVEDERE ROAD	Address	529 SOUTH FLAGLER DRIVE	
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401	
Title	DIRECTOR	Title	CFO	
Name	MITCHELL, JANE	Name	ROBERTS-RUGE, KYLE	
Address	11231 US HIGHWAY ONE #380	Address	701 OKEECHOBEE BLVD.	
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	WEST PALM BEACH FL 33401	
Title	DIRECTOR	Title	DIRECTOR	
Name	BRACCI, MICHAEL	Name	FRANKEL, STUART	
Address	11301 US HIGHWAY ONE	Address	2770 S OCEAN BOULEVARD	
City State Zin		City-State-Zip:	PALM BEACH FL 33480	
City-State-Zip:	NORTH PALM BEACH FL 33408	Title	DIRECTOR	
Title	SECRETARY		LEONE, PAUL	
Name	HARPEL, JAMES		ONE SOUTH COUNTY ROAD	
Address	525 SOUTH FLAGLER DRIVE			
City-State-Zip:	WEST PALM BEACH FL 33401		TAEW BEACHTTE 33400	
		Continues of	on page 2	
	Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name Address	NameMEYER, WILLIAM AAddress1601 BELVEDERE ROADCity-State-Zip:WEST PALM BEACH FL 33401TitleDIRECTORNameMITCHELL, JANEAddress11231 US HIGHWAY ONE #380City-State-Zip:NORTH PALM BEACH FL 33408TitleDIRECTORNameBRACCI, MICHAELAddress11301 US HIGHWAY ONEYitleNORTH PALM BEACH FL 33408TitleDIRECTORNameBRACCI, MICHAELAddress11301 US HIGHWAY ONE SUITE 1City-State-Zip:NORTH PALM BEACH FL 33408TitleSECRETARYNameHARPEL, JAMES	NameMEYER, WILLIAM ANameAddress1601 BELVEDERE ROADAddressCity-State-Zip:WEST PALM BEACH FL 33401City-State-Zip:TitleDIRECTORTitleNameMITCHELL, JANENameAddress11231 US HIGHWAY ONE #380AddressCity-State-Zip:NORTH PALM BEACH FL 33408City-State-Zip:TitleDIRECTORTitleNameBRACCI, MICHAELNameAddress11301 US HIGHWAY ONEAddressCity-State-Zip:NORTH PALM BEACH FL 33408City-State-Zip:City-State-Zip:NORTH PALM BEACH FL 33408TitleNameBRACCI, MICHAELNameAddressSUITE 1City-State-Zip:City-State-Zip:NORTH PALM BEACH FL 33408TitleTitleSECRETARYTitleNameHARPEL, JAMESAddressAddress525 SOUTH FLAGLER DRIVECity-State-Zip:City-State-Zip:WEST PALM BEACH FL 33401City-State-Zip:	

shall have the same legal effect as if made under r 617, Florida Statutes; and that my name appears oa ab

OFFICER

# SIGNATURE: KYLE ROBERTS-RUGE

Date

01/24/2022

FILED Jan 24, 2022 Secretary of State 2667610372CC

Date

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	PRESTON, MONIKA
Address	25 MIDDLE ROAD
City-State-Zip:	PALM BEACH FL 33480
Title	CHAIRMAN
Name	STOOPS, JEFFREY
Address	5900 BROKEN SOUND PKWY NW
City-State-Zip:	BOCA RATON FL 33487
Title	DIRECTOR
Name	FROMER, ROBERT
Address	340 POLMER PARK ROAD
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	BANK, PENNY
Address	200 BRADLEY PLACE APT 305
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	HURSTON, BRADLEY
Address	180 ROYAL PALM WAY
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	PETERSON, BILL
Address	1769 FLAGLER MANOR CIRCLE
City-State-Zip:	WEST PALM BEACH FL 33411
Title	DIRECTOR
Name	ENDELSON, SHERRY
Address	7027 VALENCIA DRIVE
City-State-Zip:	BOCA RATON FL 33433
Title	CEO
Name	QUINN, DIANE
Address	701 OKEECHOBEE BLVD.

City-State-Zip: W PALM BEACH FL 33401

Title Name Address City-State-Zip:	DIRECTOR SLOANE, RICHARD 1564 S OCEAN BOULEVARD PALM BEACH FL 33480
Title Name	VC BARRAT, SHERRY 5150 NORTH OCEAN DRIVE
Address City-State-Zip:	UNIT 300
Title	DIRECTOR
Name	MACK, DAVID
Address	958 NORTH LAKE WAY
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	KARP, IRENE
Address	201 EL BRILLO WAY
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	KLORFINE, NORMA
Address	2700 N OCEAN DRIVE
City-State-Zip:	SINGER ISLAND FL 33404
Title	TREASURER
Name	LAMBERT, DAVID G
Address	320 RIDGEVIEW DRIVE
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR
Name	FANJUL, LOURDES
Address	201 GARDEN ROAD
City-State-Zip:	PALM BEACH FL 33480