

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004188

Entity Name: SUNCOAST HIGH SCHOOL FOUNDATION, INC.**Current Principal Place of Business:**1717 AVENUE S
RIVIERA BEACH, FL 33404**Current Mailing Address:**1717 AVENUE S
RIVIERA BEACH, FL 33404**FEI Number:** 65-1035370**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARRON, NATALIE
1717 AVENUE S
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:** NATALIE CARRON

04/17/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BLATT, PETER
Address 210 VIA EMILIA
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name HEIN, STEVEN
Address 4600 MILITARY TRAIL
SUITE 226
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name LAMP, JANE DR.
Address 2050 PORTLAND AVENUE
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name KAMP, WALTER
Address 11622 FIR STREET
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name ZIEMERINK, JOLINE
Address 7635 IRONHORSE BLVD.
City-State-Zip: WEST PALM BEACH FL 33412

Title PRESIDENT
Name DEBOCK, MICHAEL
Address 3244 WYMBERLY DRIVE
City-State-Zip: JUPITER FL 33458

Title DIRECTOR, VP
Name GERBER, TRACY
Address 777 S. FLAGLER DRIVE
SUITE 300 EAST
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name LONEY-BROWN, DEBORAH
Address 10308 TRIANON PLACE
City-State-Zip: WELLINGTON FL 33449

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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: NATALIE CARRON**ADMINISTRATOR**

04/17/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BRUNO, PERREE
Address 7 WYCLIFFE ROAD
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name BOSHKO, ULLE
Address 324 DATURA STREET, SUITE 252
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name JAGADISH, NAGARAKERE
Address 111 CHASEWOOD CIRCLE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name MACAULEY, ISABELLE
Address 152 HAMPTON PLACE
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name NELSON, DAISY
Address 16217 HAMLIN BLVD.
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR
Name TIMMER, GARY
Address 815 MONTCLAIRE COURT
City-State-Zip: WEST PALM BEACH FL 33411

Title TREASURER
Name RAPP, BRYAN
Address 1920 WEKIVA WAY
City-State-Zip: WEST PALM BEACH FL 33436

Title VP
Name DHARIA, RUPESH DR.
Address 3502 KYOTO GARDENS DRIVE, SUITE A
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name KESSEL, STEVEN DR.
Address 14 SOMERSET DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP
Name MCCARTEN, KIMBERLY
Address 1613 NATURE COURT
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name SHIELL, IAN
Address 1045 E. ATLANTIC AVENUE #314
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY
Name KESHAVARZ WOLFS, BAHAREH
Address 10500 N. MILITARY TRAIL
City-State-Zip: PALM BEACH GARDENS FL 33410