

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 09, 2016
Secretary of State
CC8185331974

Entity Name: THE SOVEREIGN ORDER OF ST. JOHN OF JERUSALEM, KNIGHTS HOSPITALLER, COMMANDERY OF THE PALM BEACHES FOUNDATION, INC.

Current Principal Place of Business:

505 S. FLAGLER DR., STE. 1100
WEST PALM BEACH, FL 33401

Current Mailing Address:

C/O CHARLES F. SCHOECH, ESQUIRE
250 S. AUSTRALIAN AVENUE SUITE 600
WEST PALM BEACH, FL 33401 US

FEI Number: 65-1059871

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 S. FLAGLER DR., STE. 1100
WEST PALM BEACH, FL 33401 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WILLIAMS, JOSEPH JR.
Address 3000 N. UNIVERSITY DR.
 SUITE 2F
City-State-Zip: CORAL SPRINGS FL 33065

Title VP
Name MARTYNA, PAMELA J
Address 249 NW 7TH STREET
City-State-Zip: BOCA RATON FL 33432

Title SECRETARY
Name MASTRULLO, TONI
Address 7036 VESUVIO PLACE
City-State-Zip: BOYNTON BEACH FL 33437

Title TREASURER
Name LEPORE, THERESA A
Address PO BOX 3142
City-State-Zip: WEST PALM BEACH FL 33402-3142

Title DIRECTOR
Name SCHOECH, CHARLES F
Address 250 S. AUSTRALIAN AVENUE
 SUITE 600
City-State-Zip: WEST PALM BEACH FL 33401-5006

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: CHARLES F. SCHOECH

DIRECTOR

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date