

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N0000008134

Entity Name: WEST PALM BEACH LIBRARY FOUNDATION, INC.

Current Principal Place of Business:

WPBLF 411 CLEMATIS STREET 3RD FLOOR WEST PALM BEACH, FL 33401

Current Mailing Address:

WPBLF 411 CLEMATIS STREET 3RD FLOOR WEST PALM BEACH, FL 33401 US

FEI Number: 65-1068311

Name and Address of Current Registered Agent:

WEST PALM BEACH LIBRARY FOUNDATION WPBLF 411 CLEMATIS STREET 3RD FLOOR WEST PALM BEACH, FL 33401 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 | : JAMES SUGARMAN | | 10/26/2020 |
| | Electronic Signature of Registered Agent | | Date |
| Officer/Director Detail : | | | |
| Title | CHAIRMAN | Title | VC |
| Name | ALVAREZ, NATALIE M. | Name | DIANNE, BERNSTEIN |
| , 1001 000 | WPBLF 411 CLEMATIS STREET 3RD FLOOR | Address | WPBLF 411 CLEMATIS STREET 3RD FLOOR |
| City-State-Zip: | WEST PALM BEACH FL 33401 | City-State-Zip: | WEST PALM BEACH FL 33401 |
| Title | SECRETARY | Title | ASSISTANT TREASURER |
| Name | HOGAN, LESLEY | Name | MURPHY, ALAN SR. |
| | WPBLF 411 CLEMATIS STREET 3RD FLOOR | Address | 411 CLEMATIS STREET 3RD FLOOR |
| City-State-Zip: | WEST PALM BEACH FL 33401 | City-State-Zip: | WEST PALM BEACH FL 33401 |
| | | Title | DIRECTOR OF ADMINISTRATION AND FINANCE |
| | MCBRAYER, JAMES | Name | HENNEVELT, JENNIFER N |
| | WPBLF 411 CLEMATIS STREET 3RD FLOOR | Address | 411 CLEMATIS ST., 3RD FLOOR |
| City-State-Zip: | WEST PALM BEACH FL 33401 | City-State-Zip: | WEST PALM BEACH FL 33401 |
| Title | SECOND VICE CHAIR | Title | EXECUTIVE DIRECTOR |
| Name | DUPONT BAYARD , JOSEPHINE | Name | DIMKE, DEAN W |
| | WPBLF 411 CLEMATIS STREET 3RD FLOOR | Address | WPBLF 411 CLEMATIS STREET 3RD FLOOR |
| City-State-Zip: | WEST PALM BEACH FL 33401 | City-State-Zip: | WEST PALM BEACH FL 33401 |

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: JENNIFER HENNEVELT

DIRECTOR OF ADMINISTRATION AND FINANCE 10/26/2020

FILED Oct 26, 2020 Secretary of State 9230156028CC