

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02548

**Entity Name:** THE EDUCATION FOUNDATION OF PALM BEACH COUNTY, INC.**FILED**  
**Apr 21, 2022**  
**Secretary of State**  
**3396279997CC****Current Principal Place of Business:**505 SOUTH CONGRESS AVENUE  
BOYNTON BEACH, FL 33426**Current Mailing Address:**505 SOUTH CONGRESS AVENUE  
BOYNTON BEACH, FL 33426 US**FEI Number:** 59-2420369**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAVRILOS, JAMES  
505 SOUTH CONGRESS AVENUE  
BOYNTON BEACH, FL 33426 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:** CHRISTINA LAMBERT

04/21/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** CHAIR, HR/COMPENSATION  
COMMITTEE**Name** MOORE, JIM**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** CHAIR, PROGRAMS AND GRANTS  
COMMITTEE**Name** PARK, LISA**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** CHAIRMAN, BOARD OF DIRECTORS**Name** MOORE, JIM**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** SECRETARY, BOARD OF DIRECTORS**Name** LEA, KIMBERLY**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** PRESIDENT & CEO OF THE  
EDUCATION FOUNDATION OF PALM  
BEACH COUNTY**Name** GAVRILOS, JAMES**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** TREASURER, BOARD OF DIRECTORS  
& CHAIR, FINANCE COMMITTEE**Name** CASS, MARTY**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** CHAIR, DEVELOPMENT COMMITTEE**Name** KING, LISA**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426**Title** SCHOOL DISTRICT  
REPRESENTATIVE, BOARD OF  
DIRECTORS**Name** EVANS, LEANNE**Address** 505 SOUTH CONGRESS AVENUE**City-State-Zip:** BOYNTON BEACH FL 33426

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:** JAMES GAVRILOS**ACCOUNTANT**

04/21/2022

Electronic Signature of Signing Officer/Director Detail

Date