

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N02548

**Entity Name:** THE EDUCATION FOUNDATION OF PALM BEACH COUNTY, INC.

**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:** Yes

**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

09/17/2019

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 TAGLE, JUAN

Address 505 SOUTH CONGRESS AVENUE

City-State-Zip: BOYNTON BEACH FL 33426

Title SECRETARY, BOARD OF DIRECTORS

Name TRIM, MEREDITH

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 BLEISCH, DAVID

Address 505 SOUTH CONGRESS AVENUE

City-State-Zip: BOYNTON BEACH FL 33426

Title CHAIR, DEVELOPMENT COMMITTEE

Name CASS, MARTY

Address 505 SOUTH CONGRESS AVENUE

City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR OF PROGRAMS AND GRANTS

Name ETHRIDGE, JENNIFER

Address 505 SOUTH CONGRESS AVENUE

City-State-Zip: BOYNTON BEACH FL 33426

**Continues on page 2**

*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:** KARYN KEIL

**OFFICE MANAGER**

09/17/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title OFFICE MANAGER & SOCIAL MEDIA  
COORDINATOR  
Name KEIL, KARYN  
Address 505 SOUTH CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title CHIEF ENGAGEMENT OFFICER  
Name DABROWKSI, TERESA  
Address 505 SOUTH CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title RED APPLE SUPPLIES STORE MANAGER  
Name EVANS, LLOYD  
Address 7071 GARDEN ROAD  
City-State-Zip: RIVIERA BEACH FL 33404

Title DEVELOPMENT MANAGER  
Name BLOMEKE, CATHERINE  
Address 505 SOUTH CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426

Title ACCOUNTANT  
Name PETERSON, TONY  
Address 505 SOUTH CONGRESS AVENUE  
City-State-Zip: BOYNTON BEACH FL 33426