

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000389

Entity Name: OLD PALM FOUNDATION, INC.

FILED
Apr 02, 2024
Secretary of State
9339215949CC

Current Principal Place of Business:

C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE 103
CORAL SPRINGS, FL 33065

Current Mailing Address:

C/O REALMANAGE
PO BOX 803555
DALLAS, TX 75380 US

FEI Number: 72-1552883

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SACHS SAX CAPLAN, P.L.
6111 BROKEN SOUND PKWY NW #200
BOCA RATON, FL 33487 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: SACHS SAX CAPLAN

04/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MARANO, ANTHONY
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title SECRETARY
Name FAXON, DORY
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name RONERT, JANNA
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title PRESIDENT
Name KIMMET, PAMELA
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title VP
Name FLOYD, ROBERT
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name NIGRIS, MICHAEL DE III
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

Title TREASURER
Name SITVER, STEVEN
Address C/O REALMANAGE
11784 WEST SAMPLE ROAD SUITE
103
City-State-Zip: CORAL SPRINGS FL 33065

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: PAMELA KIMMET

PRESIDENT

04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date