

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001094

Entity Name: NICKLAUS CHILDREN'S HEALTH CARE FOUNDATION, INC.**FILED**
Apr 22, 2021
Secretary of State
2438468989CC**Current Principal Place of Business:**11770 U.S. HIGHWAY ONE
SUITE 308
NORTH PALM BEACH, FL 33408**Current Mailing Address:**11770 U.S. HIGHWAY ONE
SUITE 308
NORTH PALM BEACH, FL 33408 US**FEI Number:** 57-1154352**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HAILE, SHAW & PFAFFENBERGER, P.A.
660 U.S. HIGHWAY ONE, THIRD FLOOR
NORTH PALM BEACH, FL 33408 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	DIRECTOR, CHAIRMAN
Name	NICKLAUS, BARBARA
Address	11770 US HIGHWAY ONE STE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR, CHAIRMAN
Name	NICKLAUS, JACK W
Address	11770 US HWY ONE STE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR, TREASURER
Name	BRACCI, COLLEEN
Address	11770 U.S. HIGHWAY ONE SUITE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	PRESIDENT, CEO
Name	MCDONALD, PATRICIA
Address	11770 US HWY ONE SUITE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR, SECRETARY
Name	VOGELSANG, STEPHEN
Address	777 SOUTH FLAGLER DRIVE, STE 500 EAST
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DIRECTOR, VC
Name	O'LEARY, NAN
Address	11770 U.S. HIGHWAY ONE SUITE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	BEATY, KEITH
Address	11770 US HWY ONE SUITE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR, VC
Name	BRACCI, MIKE
Address	11770 US HWY ONE SUITE 308
City-State-Zip:	NORTH PALM BEACH FL 33408

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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: PATRICIA MCDONALD**PRESIDENT & CEO****04/22/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DOUGLAS, RICHARD DR.
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name LUCKS, JACK
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name NICKLAUS, STEVE
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name VIZZA, ROBERT DR.
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name BIBEAU, MARC
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name ERDMANN, LISA
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name MILSTEIN, HOWARD
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name PASCUCCI, MICHAEL
Address 11770 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name NICKLAUS , JACK II
Address 11780 US HWY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name BREMER, PAUL
Address 11770 U.S. HIGHWAY ONE
SUITE 308
City-State-Zip: NORTH PALM BEACH FL 33408