

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2013
Secretary of State
CC9885983536**

DOCUMENT# N04792

Entity Name: HANLEY CENTER, INC.

Current Principal Place of Business:

933 45TH STREET
WEST PALM BEACH, FL 33407

Current Mailing Address:

933 45TH STREET
WEST PALM BEACH, FL 33407

FEI Number: 59-2500657

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROTHERMEL, ANDREW J
933 45TH STREET
WEST PALM BEACH, FL 33407 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 D
Name CRITTON, ROBERT D
Address 303 BANYAN BOULEVARD
SUITE #400
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name MYERS, JAMES
Address 1249 BREAKERS WEST BLVD
City-State-Zip: WEST PALM BEACH FL 33411

Title D
Name ASARCH, STEVEN J.
Address 20283 STATE ROAD 7
SUITE # 400
City-State-Zip: BOCA RATON FL 33498

Title D
Name HANLEY, MICHAEL J
Address 485 WINFIELD GLEN COURT
City-State-Zip: ATLANTA GA 30342

Title D
Name DEALY, EDWIN M.
Address 15659 CARRIEDALE LANE
City-State-Zip: FT. MYERS FL 33912

Title CD
Name KEENAN, MICHAEL
Address 1700 OLD OKEECHOBEE RD.
SUITE #103
City-State-Zip: WEST PALM BEACH FL 33409

Title D
Name DUFFY, CASEY
Address 2 COUNTRY LANE
City-State-Zip: MALVERN PA 19355

Title D
Name MCGLINN, MICHAEL J.
Address 850 N. WYOMISSING BOULEVARD
City-State-Zip: WYOMISSING PA 19610

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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: MICHAEL KEENAN

BOARD CHAIR

04/16/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name TIEMAN, DOUGLAS
Address P.O. BOX 150
243 NORTH GALEN HALL ROAD
City-State-Zip: WERNERSVILLE PA 19565

Title D
Name ZINTAK III, BENJAMIN
Address 1104 THRUSH ROAD
City-State-Zip: WYOMISSING PA 19610