

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002714

Entity Name: HANDS TOGETHER OF THE PALM BEACHES, INC.**Current Principal Place of Business:**25 S. H STREET
LAKE WORTH, FL 33460**Current Mailing Address:**12415 INDIAN ROAD
NORTH PALM BEACH, FL 33408**FEI Number:** 20-2512245**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ANDERSON, NANCY
12415 INDIAN ROAD
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	D
Name	ANDERSON, NANCY
Address	12415 INDIAN ROAD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	D
Name	GOOLEY, JOANNE
Address	413 PRIVATEER ROAD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	D
Name	NARCISSE, LAVEAUX
Address	4707 OAK TERRACE DR.,
City-State-Zip:	GREENACRES FL 33463

Title	DIRECTOR
Name	SOLOMON, MELISSA
Address	117 1ST LANE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D
Name	ANDERSON, ROBERT II
Address	12415 INDIAN ROAD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	D
Name	HIGGINS, MARY JO
Address	106 ATLANTIC ROAD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	SAINT JEAN, ERINECE
Address	12415 INDIAN ROAD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	DONALDSON, MARY BETH
Address	6308 WOOD LAKE ROAD
City-State-Zip:	JUPITER FL 33458

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: NANCY ANDERSON**PRESIDENT****01/25/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	RICH, WILLIAM
Address	605 UNIVERSE BLVD., APT. # T-603
City-State-Zip:	JUNO BEACH FL 33408