

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004159

Entity Name: THE PALM BEACH MUSEUM OF NATURAL HISTORY, INC.

FILED
Apr 30, 2019
Secretary of State
6732374693CC

Current Principal Place of Business:

10300 FOREST HILL BLVD, #172
WELLINGTON, FL 33414-3120

Current Mailing Address:

10300 FOREST HILL BLVD, #172
WELLINGTON, FL 33414-3120 US

FEI Number: 06-1745912

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BATTS, NORLIZA ESQUIRE
2805 EAST OAKLAND PARK BLVD
402
FORT LAUDERDALE, FL 33306 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 P
Name PASCUCCI, RUDOLPH F. JR.
Address 10300 FOREST HILL BLVD.
SUITE 172
City-State-Zip: WELLINGTON FL 33414

Title VP
Name FLYNN, PATRICIA K
Address 2805 EAST OAKLAND PARK BLVD,
#402
City-State-Zip: FT. LAUDERDALE FL 33306

Title T
Name PEDRAZZOLI, BRYAN L
Address 3202 SHOMA DR.
City-State-Zip: WELLINGTON FL 33414

Title TRUSTEE
Name FERDINANDO, PETER DR.
Address UNIVERSITY OF NORTH CAROLINA
AT CHARLOTTE
9201 UNIVERSITY CITY BLVD.
DEPARTMENT OF HISTORY
City-State-Zip: CHARLOTTE NC 28223

Title TRUSTEE
Name RODRIGUEZ, JOAQUIN J
Address 2161 NE 51 CT.
APT WEST
City-State-Zip: FT. LAUDERDALE FL 33308

Title TRUSTEE
Name LIZANA, KATIE M
Address 3193 WILSON ST.
City-State-Zip: HOLLYWOOD FL 33021

Title TRUSTEE
Name BROWN, WAYNE ESQ.
Address 6393 BLUE BAY CIR.
City-State-Zip: LAKE WORTH FL 33467

Title TRUSTEE
Name MOLOW , BERT H
Address 381 HAMMOCKS TRL.
City-State-Zip: GREENACRES FL 33413

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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: RUDOLPH F. PASCUCCI, JR

PRESIDENT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name WESTFORT, MICHELLE DR.
Address 9613 CAMPI DR.
City-State-Zip: LAKE WORTH FL 33467