2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003145

Entity Name: COMMUNITY LAND TRUST OF PALM BEACH COUNTY AND THE

TREASURE COAST, INC.

FILED
Jan 30, 2024
Secretary of State
0402578585CC

Current Principal Place of Business:

4938 DAVIS ROAD

WEST PALM BEACH, FL 33461

Current Mailing Address:

4938 DAVIS ROAD

LAKE WORTH, FL 33461 US

FEI Number: 20-5090958 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TEMPLETON, JOHN 4938 DAVID ROAD LAKE WORTH, FL 33461 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title TREASURER

Name WHEAT, TIMOTHY P Name ZEEMAN, ANDREW

Address 2051 MARTIN LUTHER KING JR. BLVD. Address 1301 OLD OKECHOBEE

City-State-Zip: WEST PALM BEACH FL 33401

Title VF

Name MCDONALD , TAMMY
Name LACOURSE-BLUM, CINDEE A

Address 4938 DAVIS ROAD Address 3333 FOREST HILL BLVD.

City-State-Zip: WEST PALM BEACH FL 33406
City-State-Zip: WEST PALM BEACH FL 33461

Name WERTEPNY, RANDY
Name HENRY, TANGENICA

Address 711 N. DIXIE HWY, SUITE 201

Address 235 BOBWHITE RD City-State-Zip: WEST PALM BEACH FL 33401

City-State-Zip: ROYAL PALM BEACH FL 33411

Title SECRETARY

Title DIRECTOR

Name RICKETTS, SILVIA

Name PENN, DERRICK Address 3633 DAVIS LANDINGS CIRCLE

Address 124 AMANDA STREET City-State-Zip: LAKE WORTH FL 33461

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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: CINDEE A LACOURSE-BLUM

PALM SPRINGS FL 33461

EXECUTIVE DIRECTOR

01/30/2024

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ROGERS, AMIE Name ERAZO, SHIRLEY

Address 2321 SW HALISSEE ST Address 82 NW 5TH AVENUE

City-State-Zip: PORT ST LUCIE FL 34953 City-State-Zip: DELRAY BEACH FL 33444