#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003145

Entity Name: COMMUNITY LAND TRUST OF PALM BEACH COUNTY, INC.

**FILED** Jan 14, 2015 **Secretary of State** CC3399555423

# **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: Yes

### 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

Title PΠ Title VPD

LUCAS, HAZEL WHEAT, TIM Name Name

311 SOUTH DIXIE HWY, SUITE # 140 1921 ABBEY ROAD Address Address

City-State-Zip: WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33405 City-State-Zip:

Title Т Title S

Name TEMPLETON, JOHN USHER, ANGELA Name

Address 222 LAKEVIEW AVENUE, SUITE 1200 Address 3300 FOREST HILL BLVD, SUITE C-

110

WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33406 City-State-Zip:

Title DIRECTOR Title **EXECUTIVE DIRECTOR** 

Name MCDONALD ANDERSON, TAMMY Name LACOURSE-BLUM, CINDEE A Address 1700 N. AUSTRAILIAN AVENUE

4938 DAVIS ROAD Address City-State-Zip: WEST PALM BEACH FL 33407

City-State-Zip: WEST PALM BEACH FL 33461

Title DIRECTOR Title DIRECTOR

Name SANTANGELO, SEMANTHA Name ELLINGTON, DOROTHY

Address P.O. BOX 740241 Address

701 SE 6TH AVENUE, SUITE 201 City-State-Zip: BOYNTON BEACH FL 33474

City-State-Zip: DELRAY BEACH FL 33483

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: CINDEE LACOURSE-BLUM

EXECUTIVE DIRECTOR

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name MAXWELL, SCOTT

Address 7 NORTH DIXIE HWY

City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR

Name VARGAS, LIDIA

Address 4988 DAVIS ROAD

**APT 207** 

City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR

Name SCOTT, SHANIQUE Address 335 SW 2ND AVE

City-State-Zip: SOUTH BAY FL 33493

Title DIRECTOR

Name HENRY, TANGENICA

Address 235 BOBWHITE RD

City-State-Zip: ROYAL PALM BEACH FL 33411

Title DIRECTOR

Name WERTEPNY, RANDY

Address 711 N. DIXIE HWY, SUITE 201

City-State-Zip: WEST PALM BEACH FL 33401