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

DOCUMENT# N06000007713

Entity Name: THE PALM BEACH POLICE FOUNDATION, INC.

FILED Feb 23, 2015 Secretary of State CC5539576515

## **Current Principal Place of Business:**

139 NORTH COUNTY ROAD

SUITE 20C

PALM BEACH, FL 33480

# **Current Mailing Address:**

139 NORTH COUNTY ROAD SUITE 20C PALM BEACH, FL 33480

FEI Number: 83-0462654 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

RECAREY, JENNIFER 139 NORTH COUNTY ROAD STE 20C PALM BEACH, FL 33480 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 VP Title DIRECTOR

Name MORAN, TIM Name KASSEWITZ, JOEL

Address 139 NORTH COUNTY ROAD Address 139 NORTH COUNTY ROAD

SUITE 20C SUITE 20C

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

Title SECRETARY/TREASURER Title PRESIDENT

Name FRANK, GERALD Name SCARPA, JOHN F

Address 139 NORTH COUNTY ROAD Address 139 NORTH COUNTY ROAD

SUITE 20C SUITE 20C

PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 FALK, ANNIE
 Name
 SMITH, MATT

Address 139 NORTH COUNTY ROAD Address 139 NORTH COUNTY ROAD

SUITE 20C SUITE 20C

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

TitleDIRECTORTitleDIRECTORNameFREITAS, MARKNameGREENE, JEFF

Address 139 NORTH COUNTY ROAD Address 139 NORTH COUNTY ROAD

SUITE 20C SUITE 20C

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

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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: TIM MORAN VICE PRESIDENT 02/23/2015

### Officer/Director Detail Continued:

Title DIRECTOR

Name KOCH, WILLIAM I.

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR

Name LEVIN, STEPHEN A

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR

Name PRESTON, JOHN WS

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR

Name HERBERT, LAWRENCE

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title 2ND VICE PRESIDENT

Name MACK, DAVID S

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR

Name KESSLER, MICHELE

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR

Name BELISLE, MICHAEL

Address 139 NORTH COUNTY ROAD

SUITE 20C

City-State-Zip: PALM BEACH FL 33480