

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000006205

**FILED**  
**Jan 19, 2024**  
**Secretary of State**  
**2625014595CC**

**Entity Name:** BALLENISLES CHARITIES FOUNDATION, INC.

**Current Principal Place of Business:**

100 BALLENISLES CIRCLE  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

100 BALLENISLES CIRCLE  
PALM BEACH GARDENS, FL 33418 US

**FEI Number:** 45-2653459

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHERRY, EDGAR & SMITH, P.A.  
ATTN: MELISSA M. SMITH, ESQ.  
8409 NORTH MILITARY TRAIL SUITE 123  
PALM BEACH GARDENS, FL 33410 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:** MELISSA M. SMITH

01/19/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name FREEMAN, MARK  
Address 107 BANYAN ISLE DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP, DIRECTOR, TREASURER  
Name HORNER, KENNETH  
Address 116 ISLE DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR  
Name EKSTEIN, CARL  
Address 62 ST. JAMES DR.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP, DIRECTOR, SECRETARY  
Name PASSOV, JODY  
Address 117 ORCHID CAY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR  
Name BRILL, DIANE P  
Address 108A PALM POINT CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR, VP  
Name GOLDSTEIN, CHERE  
Address 1003 GRAND ISLE WAY  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR  
Name ROFFEY, ART  
Address 101 COCONUT KEY COURT  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR  
Name HIRSCH, ALLEN I.  
Address 145 BANYAN ISLE DR.  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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:** KENNETH HORNER

VP

01/19/2024

Electronic Signature of Signing Officer/Director Detail

Date