

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 25, 2015
Secretary of State
CC0915681288

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: Yes

Name and Address of Current Registered Agent:

KRIVOK, JAMES NESQ
DICKER KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE SOUTH STE 400
WEST PALM BEACH, FL 33409 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 DP
Name CORRADO, FRED
Address 13 LAGUNA COURT
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DS
Name GREENHOUSE, LINDA S
Address 141 VINTAGEISLE LANE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title T
Name KOVALSKY, BEN S
Address 114 COCONUT KEY COURT
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D
Name CUCCIOLI, RICHARD S
Address 106 ST. EDWARD PLACE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name JOSEPHS, ROMA
Address 323 SUNSET BAY LANE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name FREEMAN, MARK A
Address 116 ST. EDWARD PLACE
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: MARK A FREEMAN

DIRECTOR

01/25/2015

Electronic Signature of Signing Officer/Director Detail

Date