

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000006977

**Entity Name:** CPC OF THE WMM - WEST PALM BEACH, FL - ONE, INC.**Current Principal Place of Business:**5693 STRAWBERRY LAKES CIR  
LAKE WORTH, FL 33463**Current Mailing Address:**5693 STRAWBERRY LAKES CIR  
LAKE WORTH, FL 33463 US**FEI Number:** 47-4729665**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAUL R. ALFIERI, P.L.  
5143 NW 42 TER  
COCONUT CREEK, FL 33073 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	D
Name	SANTIZO, EFRAIN
Address	1531 DREXEL RD #160
City-State-Zip:	WEST PALM BEACH FL 33417

Title	D
Name	ALVINO, ELIEZER
Address	810 LAKE SHORE PL #22
City-State-Zip:	LAKE PARK FL 33403

Title	VP
Name	GONZALEZ, BERSAIN
Address	1531 DREXEL RD #202
City-State-Zip:	WEST PALM BEACH FL 33417

Title	D
Name	SANTOS, JUAN
Address	1531 DREXEL RD #137
City-State-Zip:	WEST PALM BEACH FL 33417

Title	P
Name	CARLOS MENDOZA, JUAN
Address	5693 STRAWBERRY LAKES CIR
City-State-Zip:	LAKE WORTH FL 33463

Title	S
Name	CRUZ, JESSICA
Address	1501 CRESCENY CIR C #25
City-State-Zip:	LAKE PARK FL 33417

*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:** JESSICA CRUZ**SECRETARY****02/01/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date