

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000007707

FILED
Mar 07, 2024
Secretary of State
6654593355CC

Entity Name: THE RECOVERY COMMUNITY HUB OF PALM BEACH COUNTY INC.

Current Principal Place of Business:

525 OKEECHOBEE BLVD
SUITE 1700
WEST PALM BEACH, FL 33401

Current Mailing Address:

525 OKEECHOBEE BLVD
SUITE 1700
WEST PALM BEACH, FL 33401 US

FEI Number: 93-1890527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMSEY, SUSAN
525 OKEECHOBEE BLVD
SUITE 1700
WEST PALM BEACH, FL 33401 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: SUSAN B RAMSEY

03/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SINGER, CINDY C
Address 525 OKEECHOBEE BLVD
SUITE 1700
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name RAMSEY, SUSAN B
Address 525 OKEECHOBEE BLVD
SUITE 1700
City-State-Zip: WEST PALM BEACH FL 33401

Title BOARD MEMBER
Name BURNS - CARTER, SHARON
Address 525 OKEECHOBEE BLVD
SUITE 1700
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER
Name MATHENY, HEIDI
Address 525 OKEECHOBEE BLVD
SUITE 1700
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY
Name GLOCK, TYLER
Address 525 OKEECHOBEE BLVD
SUITE 1700
City-State-Zip: WEST PALM BEACH FL 33401

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: HEIDI MATHENY

TREASURER

03/07/2024

Electronic Signature of Signing Officer/Director Detail

Date