2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2015
Secretary of State
CC9391053619

DOCUMENT# N24559

Entity Name: BRAILLE CLUB OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

4801 SOUTH DIXIE HIGHWAY
I
WEST PALM BEACH, FL 33405

Current Mailing Address:

4801 SOUTH DIXIE HIGHWAY
I
WEST PALM BEACH, FL 33405 US

FEI Number: 59-2484779

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCDOWELL, LARRY
4801 1/2 SOUTH DIXIE HWY
WEST PALM BEACH, FL 33405 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	PRES
Name	MCDOWELL, LARRY
Address	4801 1/2 SOUTH DIXIE HWY
City-State-Zip:	WEST PALM BEACH FL 33405

Title	TREA
Name	ED, KRAMER
Address	70 WALTHAM C
City-State-Zip:	WEST PALM BEACH FL 33417

Title	ASST. TREASURER
Name	BICE , DANNY
Address	275 NORWITH L.
City-State-Zip:	WEST PALM BEACH FL 33417

Title	SECRETARY
Name	FELUCUANO, GLADYS
Address	1041D SUMMIT PALCE CIRCLE
City-State-Zip:	WEST PALM BEACH FL 33415

Title	MEMBER
Name	CHAPMAN, NICOLE
Address	1839 ABBY ROAD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	2VP
Name	MIMS, MADALYN
Address	254 WEST 24TH STREET
City-State-Zip:	RIVIERA BEACH FL 33404

Title	VP
Name	TROIANO, RICK
Address	4704 B GREENTREE CR
City-State-Zip:	BOYNTON BEACH FL 33436

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: LARRY MCDOWELL PRESIDENT 04/22/2015

Electronic Signature of Signing Officer/Director Detail — Date