

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N36874

**FILED  
Feb 07, 2019  
Secretary of State  
2254526372CC**

**Entity Name:** PALM BEACH COUNTY HUMAN RIGHTS COUNCIL, INC.

**Current Principal Place of Business:**

650 PACIFIC GROVE DRIVE  
#6  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

650 PACIFIC GROVE DRIVE  
#6  
WEST PALM BEACH, FL 33401 US

**FEI Number: 65-0175288**

**Certificate of Status Desired: No**

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

HALL, DAN  
650 PACIFIC GROVE DRIVE  
#6  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title P  
Name HOCH, RAND  
Address 400 N FLAGLER DR #1402  
City-State-Zip: WEST PALM BEACH FL 33401

Title SD  
Name FRANKS, RAE  
Address 224 DATURA STREET  
#312  
City-State-Zip: WEST PALM BEACH FL 33401

Title T  
Name HALL, DAN S TREASURER  
Address 650 PACIFIC GROVE DRIVE  
#6  
City-State-Zip: WEST PALM BEACH FL 33401

Title VICE PRESIDENT AND DIRECTOR  
Name CASS, CARLY  
Address 1131 SAND DRIFT WAY  
City-State-Zip: WET PALM BEACH FL 33411

Title TREASURER AND DIRECTOR  
Name HALL, DAN  
Address 650 PACIFIC GROVE DRIVE  
#5  
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY AND DIRECTOR  
Name FRANKS, RAE  
Address 224 DATURA STREET, SUITE 900  
City-State-Zip: WEST PALM BEACH GARDENS 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: DANIEL S HALL**

**TREASURER**

**02/07/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date