

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43029

**Entity Name:** THE SOUTH FLORIDA CHAPTER OF THE KOMEN FOUNDATION, INC.**FILED**  
**Jun 30, 2020**  
**Secretary of State**  
**4019975552CC****Current Principal Place of Business:**1309 N. FLAGLER DRIVE, 5TH FLOOR  
WEST PALM BEACH, FL 33401**Current Mailing Address:**5005 LBJ FREEWAY #526  
DALLAS, TX 75244 US**FEI Number: 65-0254225****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: ROSEMARIE GAGLIARDINO****06/30/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	LAUGHLIN, HEATHER
Address	1309 NORTH FLAGLER DRIVE, 5TH FLOOR
City-State-Zip:	WEST PALM BEACH FL 33410

Title	PRESIDENT
Name	ORAN, AMY
Address	AT GOOD SAMARITAN MEDICAL CENTER 1309 N. FLAGLER DRIVE, 5TH FLOOR
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DIRECTOR
Name	ABRAMSON, PATRICIA
Address	AT GOOD SAMARITAN MEDICAL CENTER 1309 N. FLAGLER DRIVE, 5TH FLOOR
City-State-Zip:	WEST PALM BEACH FL 33401

Title	SECRETARY
Name	LIST, KAREN
Address	AT GOOD SAMARITAN MEDICAL CENTER 1309 N. FLAGLER DRIVE, 5TH FLOOR
City-State-Zip:	WEST PALM BEACH FL 33401
Title	DIRECTOR
Name	UTTON, JASON
Address	AT GOOD SAMARITAN MEDICAL CENTER 1309 N. FLAGLER DRIVE, 5TH FLOOR
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: AMY SIEGEL ORAN****PRESIDENT****06/30/2020**

Electronic Signature of Signing Officer/Director Detail

Date