

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43029

FILED
Jan 09, 2015
Secretary of State
CC9273372640

Entity Name: THE SOUTH FLORIDA CHAPTER OF THE KOMEN FOUNDATION, INC.

Current Principal Place of Business:

AT GOOD SAMARITAN MEDICAL CENTER
1309 N. FLAGLER DRIVE, 5TH FLOOR
WEST PALM BEACH, FL 33401

Current Mailing Address:

AT GOOD SAMARITAN MEDICAL CENTER
1309 N. FLAGLER DRIVE, 5TH FLOOR
WEST PALM BEACH, FL 33401

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BACHMAN, GEORGE M
Address 4127 CEDAR AVENUE
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER
Name SMITH, SUSAN
Address 11085 NW 20TH DRIVE
City-State-Zip: CORAL SPRINGS FL 33071

Title VICE TREASURER
Name LICAMARA, TERESA A
Address 6121 INDIAN FOREST CIRCLE
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name BERROCAL, CARLOS
Address 18673 LAKE BEND DRIVE
City-State-Zip: JUPITER FL 33458

Title EXECUTIVE DIRECTOR
Name GABBARD, DAYVE
Address 209 N. LAKESHORE DRIVE
City-State-Zip: HYPOLUXO FL 33462

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: DAYVE GABBARD

EXECUTIVE DIRECTOR

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date