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

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43029

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

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

Officer/Director Detail :

City-State-Zip: DELRAY FL 33446

	Title	TREASURER	Title	PRESIDENT
	Name	BACHMAN, GEORGE M	Name	BERROCAL, CARLOS
	Address	4127 CEDAR AVENUE	Address	18673 LAKE BEND DRIVE
	City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	JUPITER FL 33458
	Title	EXECUTIVE DIRECTOR	Title	VP
	Name	GABBARD, DAYVE	Name	WEISS, JILL G.
	Address	209 N. LAKESHORE DRIVE	Address	1029 RAINTREE DRIVE
	City-State-Zip:	HYPOLUXO FL 33462	City-State-Zip:	PALM BEACH GARDENS FL 33410
	Title	SECRETARY		
	Name	MULLINS, STACEY		
	Address	16259 BRISTOL POINT DRIVE		

EXECUTIVE DIRECTOR 02/08/2016

Date

FILED Feb 08, 2016 Secretary of State CC1825685581

Certificate of Status Desired: No

Date