2015 FLORIDA NOT FOR PROFIT	CORPORATION ANNUAL REPORT
DOCUMENT# N95000004874	

Entity Name: PLEASANT CITY FAMILY REUNION COMMITTEE, INC.

Current Principal Place of Business:

2117 N. DIXIE HWY WEST PALM BEACH, FL 33407

Current Mailing Address:

P.O. BOX 4727 WEST PALM BEACH, FL 33402 US

FEI Number: 65-0613550

Name and Address of Current Registered Agent:

CLARKE, EVEREE J 5600 N FLAGLER DRIVE SUITE 702 WEST PALM BEACH, FL 33407 US FILED Apr 27, 2015 Secretary of State CC5497295401

Date

Certificate of Status Desired: No

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 :

Officer/Director Detail :			
Title	PRESIDENT	Title	VP
Name	CLARKE, EVEREE J	Name	CLARKE, FRANCES Y
Address	5600 N FLAGLER DRIVE SUITE 702	Address	5600 N FLAGLER DRIVE SUITE 702
City-State-Zip:	WEST PALM BEACH FL 33407	City-State-Zip:	WEST PALM BEACH FL 33407
Title	SECRETARY	Title	DIRECTOR
Name	WILSON, ELOUISE	Name	GASKIN FITCHUE, LEAH DR.
Address	1281 W 1ST STREET	Address	1481 DRAGONWICK COURT
City-State-Zip:	RIVIERA BEACH FL 33404	City-State-Zip:	BEAVERCREEK OH 45385
Title	DIRECTOR	Title	DIRECTOR
Name	GASKIN, REV. GEORGE	Name	JENKINS, BOBBYE
Address	1348 W 33RD STREET	Address	1414 BRIAN WAY
City-State-Zip:	RIVIERA BEACH FL 33404	City-State-Zip:	WEST PALM BEACH FL 33417
Title	DIRECTOR	Title	DIRECTOR
Name	EVANS, JOHN	Name	SHERMAN, ESTER
Address	1011 W SECOND STREET	Address	3858 ORIELY DRIVE
City-State-Zip:	RIVERA BEACH FL 33404	City-State-Zip:	JACKSONVILLE FL 32226-6222

Continues on page 2

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:	WILSON , ELOUISE	DIRECTOR	04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	DRIMOUS, CORNELIA	Name	GALULA, MIGELL
Address	260 HERITAGE LAKE DRIVE	Address	844 S.W. AVENUE B
City-State-Zip:	FAYETTEVILLE GA 30214	City-State-Zip:	BELLE GLADE FL 33430-3223
Title	DIRECTOR	Title	DIRECTOR
Name	JENKINS, BOBBYE	Name	EVANS, JOHN
Address	1414 BRIAN WAY	Address	1011 W SECOND STREET
City-State-Zip:	WEST PALM BEACH FL 33417	City-State-Zip:	RIVERA BEACH FL 33404
Title	DIRECTOR	Title	DIRECTOR
Name	SHERMAN, ESTER	Name	DRIMOUS, CORNELIA
Address	3858 ORIELY DRIVE	Address	260 HERITAGE LAKE DRIVE
City-State-Zip:	JACKSONVILLE FL 32226-6222	City-State-Zip:	FAYETTEVILLE GA 30214
Title	DIRECTOR	Title	DIRECTOR
Name	GALULA, MIGELL	Name	JENKINS, BOBBYE
Address	844 S.W. AVENUE B	Address	1414 BRIAN WAY
City-State-Zip:	BELLE GLADE FL 33430-3223	City-State-Zip:	WEST PALM BEACH FL 33417
Title	DIRECTOR	Title	DIRECTOR
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