

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004874

Entity Name: PLEASANT CITY FAMILY REUNION COMMITTEE, INC.**Current Principal Place of Business:**605 EXECUTIVE CENTER DR #203
WEST PALM BEACH, FL 33401**Current Mailing Address:**P.O. BOX 4724
WEST PALM BEACH, FL 33402 US**FEI Number:** 65-0613550**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLARKE, EVEREE J
605 EXECUTIVE CENTER DR #203
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 TREASURER
Name FITCHUE, LEAH GASKIN DR
Address 2022 FLAGLER PLACE, NW
 APT 101
City-State-Zip: WASHINGTON DC 20001

Title DIRECTOR
Name PRIMOUS, CORNELIA
Address 260 HERITAGE LAKE DRIVE
City-State-Zip: FAYETTEVILLE GA 30214

Title DIRECTOR
Name HARPER, RONALD ATTY
Address 336 PELLHAM RD
City-State-Zip: PHILADELPHIA PA 19144-3307

Title VP
Name CLARKE, FRANCES Y
Address 605 EXECUTIVE CENTER DR #203
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY
Name WILSON, ELOUISE
Address 1281 WEST 1ST STREET
City-State-Zip: RIVIERA BEACH FL 33404

Title DIRECTOR
Name WILLIAMS, TONA
Address 4786 23RD LANE N
 ROUTE 185
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT
Name CLARKE, EVEREE J
Address 605 EXECUTIVE CENTER DR #203
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name HAMILTON, ESTER
Address 1439 AVENUE E
City-State-Zip: RIVIERA BEACH FL 33404

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: FRANCES CLARKE

VP

03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHERMAN, ESTHER
Address 3858 O'RILLEY DRIVE
City-State-Zip: JACKSONVILLE FL 32220

Title DIRECTOR
Name KAPLAN, GLENDA BYRD
Address 6245 RED CEDAR CIRCLE
City-State-Zip: GREENACRES FL 33462

Title DIRECTOR
Name REDDING, MARGARITE LEWIS
Address 919 30TH COURT
City-State-Zip: WEST PALM BEACH FL 33407

Title DIRECTOR
Name EWERS, DEANNA
Address 17186 MURCOTT BLVD
City-State-Zip: LOXAHATCHEE FL 33412