

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712033

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** OAKWOOD CENTER OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

1041-45TH STREET  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

1041-45TH STREET  
WEST PALM BEACH, FL 33407 US

**Current Mailing Address:**

1041-45TH STREET  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

1041-45TH STREET  
WEST PALM BEACH, FL 33407 US

**FEI Number:** 59-1171320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HAYGOOD, MICHAEL  
1551 FORUM PL STE 4B  
WEST PALM BEACH, FL 334023183 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: GOLDEN, BARBARA E PH.D.  
Address: 3341 MONET DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VC  
Name: WILSON, RICHARD H  
Address: 5097 VICTORIA CIRCLE  
City-St-Zip: WEST PALM BEACH,, FL 33409 US

Title: S  
Name: GIONFRIDDO, PAUL  
Address: 705 SOUTH PALMWAY  
City-St-Zip: LAKE WORTH, FL 33480 US

Title: T  
Name: MORTON, TERRY L  
Address: P.O. BOX 347  
City-St-Zip: WEST PALM BEACH, FL 33402 US

Title: D  
Name: BAKER, DAVID  
Address: 340 ROYAL POINCIANA WAY, SUITE 321  
City-St-Zip: PALM BEACH, FL 33480 US

Title: D  
Name: WIESEN, STEVEN R  
Address: 21500 SOUTHERN BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

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: BARBARA GOLDEN, PH.D.

C

04/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date