## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 722368** 

FILED Apr 27, 2007 Secretary of State

Entity Name: THE COMMUNITY FOUNDATION FOR PALM BEACH AND MARTIN COUNTIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 700 SOUTH DIXIE HWY SUITE 200 WEST PALM BEACH, FL 33401 **New Mailing Address: Current Mailing Address:** 700 SOUTH DIXIE HWY SUITE 200 WEST PALM BEACH, FL 33401 FEI Number: 23-7181875 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SADLER, SHANNON Name: Name: 318 AUSTRALIAN AVENUE Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ALVAREZ, RONALD Name: MATTHEWS, WILLIAM M Name: Address: 205 NORTH DIXIE HWY Address: 1925 NORTH FLAGLER DRIVE City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33407 Title: () Delete Title: () Change () Addition CHAPIN, BARBARA BISHOP Name: Name: 8 SANDPIPER DRIVE Address: Address: City-St-Zip: VILLAGE OF GOLF, FL 33436 City-St-Zip: (X) Change ( ) Addition Title: Title: ( ) Delete Name: ALVAREZ, RONALD V Name: JOHNSON, REUBEN B III 205 NORTH DIXIE HWY., ROOM 2.1406 ONE NORTH CLEMATIS STREET, SUITE 300 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 Title: () Delete Title: (X) Change ( ) Addition CHAPIN, BARBARA PUCILLO, DEBORAH DALE Name: Name: 8 SANDPIPER DRIVE 224 DUNBAR ROAD Address: Address: City-St-Zip: VILLAGE OF GOLF, FL 33436 City-St-Zip: PALM BEACH, FL 33480 Title: () Delete Title: (X) Change ( ) Addition COLLINS, CAROL MATWICZYK, PETER Name: Name: Address: 300 SOUTH OCEAN BLVD Address: 625 NORTH FLAGLER DRIVE, SUITE 401 PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GLORIA ORTEGA REX CPA, MBA O 04/27/2007