

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726274

FILED
Jun 07, 2011
Secretary of State

Entity Name: THE PALM BEACH STATE COLLEGE FOUNDATION, INCORPORATED

Current Principal Place of Business:

4200 CONGRESS AVE
MS # 20
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

4200 CONGRESS AVE
MS # 20
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 59-1818556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET
SUITE 1
TALLAHASSEE, FL 32301 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: LOWRY, TRISH MS.
Address: 3451 NORTHLAKE BLVD
City-St-Zip: LAKE PARK, FL 33403

Title: VC
Name: HAMMA, ELIZABETH
Address: 477 S. ROSEMARY AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S
Name: THEODOSSAKOS, ANTOINETTE
Address: 660 US HIGHWAY ONE THIRD FLOOR
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D
Name: MANN, SUELLEN
Address: 4200 CONGRESS AVENUE
City-St-Zip: LAKE WORTH, FL 33461

Title: V
Name: CHOURIS, VICKI
Address: P.O. BOX 210367
City-St-Zip: WEST PALM BEACH, FL 33421

Title: T
Name: RAMPOLLA, PAUL
Address: 525 OKEECHOBEE BLVD, SUITE 900
City-St-Zip: WEST PALM BEACH, FL 33401 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: MS. SUELLEN MANN

D

06/07/2011

Electronic Signature of Signing Officer or Director

Date