FILE NOW: FILING FEE IS $61.25

FILED
Mar 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743056 (4)

1. Corporation Name

FARMWORKER COORDINATING COUNCIL OF PALM BEACH CO UNTY, INC.

Principal Place of Business	Mailing Address
RT 1 BOX 1139 BOYNTON BCH FL 33437-4703	RT 1 BOX 1139 BOYNTON BCH FL 33437-4703

3. Date Incorporated or Qualified: 05/30/1978

4. FEI Number: 59-1830267 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

5. Certificate of Status Desired ☑ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~RUBEN, CHAVEZ~~ ~~19397 DELAWARE CIR.~~ ~~BOCA RATON FL 33434~~	81 Name: MARIA J. NAPE 82 Street Address (P.O. Box Number is Not Acceptable): ROUTE 1 BOX 1139 83 84 City: BOYNTON BEACH FL 85 Zip Code: 33437

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Maria J. Nape — 3/5/98 (DATE)
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	HASTINGS, BERNARD		1.2 NAME	David Sales	
STREET ADDRESS	5542 MIRROR LAKE BLVD.		1.3 STREET ADDRESS	2139 Palm Beach Lakes Blvd	
CITY-ST-ZIP	BOYNTON BCH. FL		1.4 CITY-ST-ZIP	West Palm Beach, Fl 33407	
TITLE	D	☐ DELETE	2.1 TITLE	D	☐ Change ☒ Addition
NAME	JACKSON, JEREZ		2.2 NAME	Maria J. Nape	
STREET ADDRESS	472 B HIGHPOINT DRIVE		2.3 STREET ADDRESS	Route 1 Box 1139	
CITY-ST-ZIP	DELRAY BEACH FL		2.4 CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DIDONE, FATHER MATTHEW		3.2 NAME		
STREET ADDRESS	9500 W. ATLANTIC AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		3.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SCOTT, CONNIE		4.2 NAME		
STREET ADDRESS	1915 NW 10TH ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BCH. FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SCHELL, GREG		5.2 NAME		
STREET ADDRESS	406 SE AVE E SUITE 102		5.3 STREET ADDRESS		
CITY-ST-ZIP	BELLE GLADE FL		5.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CHAVEZ, RUBEN		6.2 NAME		
STREET ADDRESS	19397 DELAWARE CIR.		6.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Maria J. Nape REQUIRED — 2/11/98 — (561)736-1566