

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002957

FILED
Apr 04, 2008
Secretary of State

Entity Name: PARTNERSHIP FOR A DRUG-FREE COMMUNITY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

3361 BELVEDERE ROAD
SUITE D
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

13132 48TH CT N
ROYAL PALM BCH, FL 33411

New Mailing Address:

FEI Number: 65-1100146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, DORIS
13132 48TH CT N
ROYAL PALM BCH, FL 33411 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: P () Delete
Name: CARROLL, DORIS
Address: 13132 48TH COURT NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: MAL () Delete
Name: GANNON, BETTY
Address: 12890 WILTON ROAD
City-St-Zip: JUNO BEACH, FL 33408

Title: COB () Delete
Name: MCVINNEY, DAVID
Address: 529 SUNSET RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S () Delete
Name: DAVIS, HEATHER
Address: 8961 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33411

Title: T () Delete
Name: DITRICH, DENIS
Address: 913 N. ATLANTIC DR
City-St-Zip: LANTANA, FL 33462

Title: MAL () Delete
Name: ALDCROFT, ALLISON
Address: 1017 NORTH OLIVE AVE.
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CROSBY, CHRISTOPHER
Address: 160 SWEET BAY CIRCLE
City-St-Zip: JUPITER, FL 33458

Title: T (X) Change () Addition
Name: FAIN, DAN
Address: 345 INDIAN GROVE DR.
City-St-Zip: STUART, FL 34994

Title: SEC (X) Change () Addition
Name: ALDCROFT, ALLISON
Address: 1017 NORTH OLIVE AVE.
City-St-Zip: WEST PALM BEACH, FL 33401

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: DORIS CARROLL

P

04/04/2008

Electronic Signature of Signing Officer or Director

Date