

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002957

FILED
Apr 30, 2009
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:

2924 N. AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33407

Current Mailing Address:

13132 48TH CT N
ROYAL PALM BCH, FL 33411

New Mailing Address:

PO BOX 30427
PALM BEACH GARDENS, FL 33420

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: CHESTER, JAMES
Address: 2900NORTH AUSTRALIAN AVE
City-St-Zip: WEST PALM BEACH, FL 33408 US

Title: COB () Delete
Name: CROSBY, CHRISTOPHER
Address: 160 SWEET BAY CIRCLE
City-St-Zip: JUPITER, FL 33458 US

Title: VP () Delete
Name: DAWE, RON
Address: 1017 N. OLOVE AVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

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

Title: SEC () Delete
Name: SINGLETON, JARVIS
Address: 2900 NORTH AUSTRALIAN AVE
City-St-Zip: WEST PALM BEACH, FL 33407 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: CARROLL, DORIS
Address: 13132 48TH COURT NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: MAL (X) Change () Addition
Name: CHESTER, JAMES
Address: 2900 NORTH AUSTRALIAN AVE
City-St-Zip: WEST PALM BEACH, FL 33407 US

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

Title: VP (X) Change () Addition
Name: DAWE, RON
Address: 1017 N. OLIVE AVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

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

Title: () Change () Addition
Name:
Address:
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: DORIS A CARROLL

ED

04/30/2009

Electronic Signature of Signing Officer or Director

Date